Submit this document only if you are NOT making satisfactory academic progress for financial aid and wish to appeal to receive Federal Student aid on a probationary basis for ONE semester. You will be notified about the status of your appeal by the Financial Aid Office. Please note that approval of your appeal is not guaranteed.

Student Name (please print) ___________________________ Student ID#: ___________________ Date: ______________

During which academic year and semester do you need to receive financial aid on a probationary basis? _________________
(You must apply for a specific semester.)

Please state clearly why you are not currently making satisfactory academic progress for financial aid.
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________

How do you plan to make satisfactory academic progress?
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________

If the Academic Advisory Committee has given you conditions that you must meet please state those conditions here or attach the letter from the Advisory Committee.
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________________

Please carefully read the Satisfactory Academic Progress for Financial Aid Eligibility section in the Earlham College Curriculum Guide.

How many credits will you take during your one probationary semester if your appeal is approved? _________________

How many total credits must you have at the end of the one probationary semester if your appeal is approved? _________________

What cumulative grade point average must you achieve during your one probationary semester to meet the minimum cumulative grade point average required for you to make satisfactory academic progress? _________________  (Please contact the Earlham College Registrar for assistance with this question if needed.)

What cumulative grade point average must you have at the end of your one probationary semester of receiving aid? _________________

I certify that I have read the Satisfactory Academic Progress for Financial Aid Eligibility section in the Earlham College Curriculum Guide. I fully understand how many credits I must earn and the grade point average that I must achieve to make satisfactory academic progress towards my degree to receive financial aid. I also understand that I can receive financial aid on a probationary basis for only one (1) semester.

I understand that Earlham-funded aid is limited to a student’s first 8 semesters or attendance including time spent at another college or university.

I also understand that Earlham College expects each student to complete their degree requirements in four years. To meet this expectation, a student should average 15.25 credits each semester.

I realize that if this petition is approved and if I do not achieve either (1) the standards published in the Earlham College Curriculum Guide or (2) the conditions expected of me by the Academic Advisory Committee then I will no longer be eligible to receive Federal Student Financial Aid or Earlham-funded financial aid for attendance at Earlham College.

Student Signature ___________________________________________________________ Date ____________________________________