

# **APPEAL OF SATISFACTORY ACADEMIC PROGRESS**

Student's Name: \_\_\_\_\_ k number \_\_\_\_\_ Phone: \_\_\_\_\_

Term you are appealing:      **Fall**              **Spring**              **Summer**      20\_\_

*Please check off each step as you complete it and attach documentation to this form.*

1) Please plan your next two semesters here at Kirkwood. If you need assistance with planning, use the EagleView Program Planner on EagleNet: <https://eaglenet.kirkwood.edu> or contact your academic advisor.

Term		Term	
1)		1)	
2)		2)	
3)		3)	
4)		4)	

2) Write a detailed explanation of the unusual or extenuating circumstances that prevented you from meeting the minimum financial aid standards. If you need additional space, please use a separate paper.

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3) Outline the steps you will take to ensure future success attaining your academic goals. Examples: meeting with an academic advisor or counselor, tutoring, ensuring more time for coursework by cutting back work hours, etc.

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4) Attach supporting documentation of your unusual or extenuating circumstances or your plans for future success. For example, copies of obituaries, doctor bills, a supporting statement from an academic advisor, etc.

All of the information provided in this appeal is true. I understand that appeals without sufficient documentation will be automatically denied.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_