

Office use only:

Financial Aid Office

Contact Us: P:(972) 881-5760 FinancialAid@collin.edu

Satisfactory Academic Progress Appeal for Major or Grade Change	
Name:CWID:	
Instructions:	
In a TYPED and SIGNED letter explain the circumstances that caused you not to meet Sa Academic Progress (SAP).	tisfactory
2. I am requesting a revision of my Satisfactory Academic Progress status because of a:	
☐ MAJOR CHANGE: This only applies if you change from a Certificate to an Associate's degree Associate's degree.	ee or an
Updated Major: GRADE CHANGE Course Name:	
Previous Grade: Current Grade:	
Satisfactory Academic Progress (SAP) Financial Aid Appeal Process" (see link below): https://www.collin.edu/financialaid/financialaidcounseling.html *You will need to create a new login to complete this counseling session.	
Appeal Review An appeal that does not meet the requirements per the SAP policy will not be approved.	
Student Agreement I certify that my statement is true and accurate. I understand that I am responsible for a charges and payment deadlines while my appeal is being reviewed.	ny
The deadline for submitting an appeal is 30 days after the official first day of classes for semester.	a
Student Signature: Date:	
For Financial Aid Office Use Only	
Check appropriate box and print screen: □ For Major Change: SGASTDN □ For Grade Change: SHATCKN	

Aid Year: ____ Campus: ____ Date: ____ RRAAREQ Code: APPEAL Status Code: ____ Initials: __