East Los Angeles College - Financial Aid & Scholarship Office

2011-2012 Individual

SATISFACTORY ACADEMIC PROGRESS
PETITION FOR REINSTATEMENT/EXTENSION OF FINANCIAL AID

_____,_____ _____
Last Name First Name MI Social Security Number / Student ID

Federal financial aid regulations require schools to establish a policy that assesses a student's academic progress and promotes timely completion of an educational program. The Los Angeles Community College District (LACCD) Financial Aid Satisfactory Academic Progress (SAP) Policy states that students must maintain the following:

- ☑ **Cumulative Grade Point Average (GPA) of at least a 2.0:** Students who do not meet these minimum requirements must complete the Reinstatement petition process for continued financial aid consideration.
- ☑ **Complete a minimum of 67% of all units attempted**: Students who do not meet these minimum requirements must complete the Reinstatement petition process for continued financial aid consideration.
- ☑ **Complete the chosen educational goal within the establish LACCD maximum time limit on financial aid:** Students who have **attempted** 90 or more units, **completed** a transfer program, or **completed** an Associate degree or higher outside the LACCD must complete the Extension petition process for continued financial aid consideration.
  Note: *Students that have obtained a bachelor's degree will only be eligible for unsubsidized loans*.

You have failed to meet one or few of the following SAP requirements:

- ☐ Cumulative Grade Point Average (GPA) of at least a 2.0
- ☐ Complete a minimum of 67% of all units attempted
- ☐ You have attempted 90 or more units
- ☐ Completed a transfer program, Associate degree or higher

INSTRUCTIONS:

1. Complete the attached petition form if you are requesting a reinstatement of financial aid eligibility. Your petition should address reasons **other than financial need** for extending your financial aid eligibility. **Attach any additional documentation (i.e. medical statement, police report, etc) to support your petition.**

2. Your petition must be completed legibly in ink or typed and contain your complete explanation of circumstances that contributed to your inability to maintain satisfactory academic progress and what you have done to address these circumstances**. It is highly recommended that you include a comprehensive explanation of your past circumstances and your plan to rectify your situation.** An incomplete petition will be returned to you. *You must complete your petition form before continuing to Step 3 below.*

3. You need to make an appointment with your academic counselor to discuss any issues affecting your past academic performance and potential solutions to improve your future academic performance. The Educational Plan form may be completed by certified counselors from other programs such as EOP&S and DSPS. The Educational Plan form must be attached to your petition form.
   Note: *Students that have obtained a bachelor's degree will require a* ***complete outline*** *of their educational goal while attending the LACCD.*

4. The Financial Aid Director or her designee will review your petition and notify you in writing of the decision within 30 working days from the receipt of your petition.

5. Submit your completed Petition form, the complete Student Educational Plan (SEP), and other supporting documents to the Financial Aid & Scholarship Office at the main campus (E1-173) or South Gate Educational Center.

6. Deadlines: Summer 2011: July 15, 2011 | Fall 2011: January 13, 2012 | Spring 2012: June 15, 2012

The LACCD Satisfactory Academic Progress policy on the web at www.laccd.edu or our website at www.elac.edu

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2011-2012

SATISFACTORY ACADEMIC PROGRESS
PETITION FOR REINSTATEMENT OF FINANCIAL AID

_____,_____ _____

Last Name First Name MI Social Security Number / Student ID

THIS FORM IS TO BE COMPLETED BY THE STUDENT. Please complete this form in ink or typed.

Please explain the circumstances that contributed to your inability to maintain satisfactory academic progress. (You may use or attach a separate sheet and supporting documentation i.e. medical statement, police report, etc)

Please explain what you have done or your plan to address the circumstances that prevented you from maintaining satisfactory academic progress. (You may use or attach a separate sheet)

I understand that the Financial Aid Office will not accept Satisfactory Academic Progress (SAP) Petitions that are incomplete or lacking required documentation. I am, therefore, submitting my complete SAP Petition. I understand that I must submit my petition and other supporting documentation before the deadline(s) noted on the first page of this petition form. Once a decision has been made, the Financial Aid Office will notify me in writing.

_____ _____

Student's Signature Date

East Los Angeles College - Financial Aid & Scholarship Office

2011-2012

SATISFACTORY ACADEMIC PROGRESS
ACADEMIC COUNSELING ASSESSMENT

_____,_____ _____
Last Name First Name MI Social Security Number / Student ID

THIS FORM IS TO BE COMPLETED BY THE ACADEMIC COUNSELOR. Please print or type.

Anticipated transfer institution (if applicable): _____

Anticipate transfer term: _____

COUNSELOR COMMENTS *(i.e., counselor advice for student to assist in rectifying circumstances that contributed to the student's inability to maintain satisfactory academic progress):*

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_____ _____ _____
Counselor Name Counselor Signature Date

FOR FINANCIAL AID OFFICE USE

GPA @ time of disq _____

% non-pass @ time of disq _____

Petition Granted: YES NO
Term: _____
FAA: _____
Date: _____

Comments (**LTR** = Add to Appeal Decision Letter): _____