



Satisfactory Academic Progress (SAP) Revision

STUDENT ID	LAST NAME	FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

APPEAL PROCESSING DEADLINES

Fall 2019 Semester November 1 Spring 2020 Semester April 10

CHECK ALL APPLICABLE BOXES BELOW AND FOLLOW THE INSTRUCTIONS PROVIDED

I am submitting a revision to my previously approved SAP Appeal Plan. This revised Graduation Plan is effective: _____ . [Make sure to attach a copy of your revised Graduation Plan]
(Term and Year)

I have earned credit for a course that was previously reported as incomplete and is now on my University transcript.
 List course(s) and semester(s) that apply:

Course Name and Number	Semester Taken	Units	Orig. Grade	New Grade (Circle One)
			I	A B C D CR
			I	A B C D CR

A grading error has been corrected. List course(s) and semester(s) that apply:

Course Name and Number	Semester Taken	Units	Orig. Grade	New Grade (Circle One)
				A B C D CR
				A B C D CR

I have successfully completed # _____ additional transferable units at _____, during _____.
(School Name) (Term and Year)

If you have previously transferred 70 units into Fresno State, do not submit this form.

Other: _____

REASON FOR REVISION:

**Your financial aid SAP status must be resolved before any future financial aid is awarded.
 SAP status revisions/decisions will be sent to your campus email.**

I certify that all information provided on this appeal and all attachments are complete and accurate. I understand that incomplete documents will result in a delay of processing. Per University policy, incomplete documents will not be returned to me and will be disposed of in a secure manner.

Student's Signature: _____ Date: _____