



**2021–2022 Academic Year  
Satisfactory Academic Progress (SAP) Appeal Form  
BYU–Hawaii Financial Aid & Scholarships**

**SAP Appeal**

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**Part 1 – Student Information**

Student Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Part 2 – Satisfactory Academic Progress Information**

Check the appropriate term that you would like to submit this appeal for Cost of Attendance.

Semester:     Fall, 2021                       Winter, 2022                       Spring, 2022

**Request for Exception:**

- I did not earn at least a 2.0 GPA and 67% of the credits I had attempted.
- I did not earn the minimum credits required for the Pell Grant disbursements I received.
- I have exceeded the allowable number of credits for my declared degree.
- I have previously earned a degree.

**Part 3 – Support Documentation**

Petitions requesting exceptions to the Brigham Young University–Hawaii Satisfactory Academic Progress Policy require the following:

1. A copy of your academic performance and current academic plan.
2. Completion of a one-page essay from you that addresses the following questions.
  - a. What extenuating circumstances prohibited you from meeting the Satisfactory Academic Progress requirements?
  - b. What changes have occurred that will enable you to meet the Satisfactory Academic Progress requirements in the future?
3. Attach written documentation to substantiate the mitigating circumstances addressed in your essay. (Suggested documentation includes third party letters, such as letters from bishops or other clergy, social service personnel, medical professionals, academic support counseling, etc.)

**Part 4 - Certification**

By signing below, I certify that the information on this form and all attached documentation is true and complete to the best of my knowledge. I waive my rights to the Family Education Rights and Privacy Act regarding supporting documentation for this petition.

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

FA Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

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Committee Review Date: \_\_\_\_\_ Decision:    Conditional Approval    Approved    Denied

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

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Final Review: \_\_\_\_\_ Date: \_\_\_\_\_