Satisfactory Academic Progress (SAP)
Maximum Time Frame (MTF)
Suspension Appeal Form

STUDENT INFORMATION

Name: _____ Student ID: _____

Secondary Email Address: _____ Phone #: _____

Term & Year Requesting Reinstatement: Fall _____ Spring _____ Summer _____

APPEAL & DOCUMENTATION INFORMATION

I am appealing my (check all that apply)

☐ **Academic Suspension**: earned less than a cumulative 2.0 GPA and/or failed to complete 67% of all courses attempted.

☐ **Financial Aid Suspension**: projected cumulative GPA and/or completion rates indicate you will not graduate within 150% of the credits required for your program.

☐ **Maximum Time Frame Suspension:** attempted, but did not complete, 150% of program credit requirements.

I am appealing based on (check all that apply):	**Documentation required and attached:**
☐ Personal physical health or mental health issue	Health providers' statement written on official letterhead
☐ Death of a family member	Death certificate or obituary
☐ Military call up for active duty	Copy of official military orders
☐ Family/relationship crisis	Court or legal documentation
☐ Childcare	Documentation from childcare provider
☐ Disability issue not previously diagnosed or documented	Documentation verified by Accessibility Resource Center
☐ Natural disaster, including flood, fire, or tornado	Copy of insurance claim and/or record of media
☐ Job loss	Unemployment verification or termination letter
☐ Loss of housing	Eviction notice, letter from shelter or social worker
☐ Recent academic success at another college or university	Attach transcript
☐ Change of major or academic goal (for MTF only)	Attach updated DARS report and graduation plan
☐ OTHER_____	Documentation_____

SUPPORT SYSTEM INFORMATION

In order for me to succeed next semester, I have put a support system in place. To improve my academic performance and reach my goal for the term, I commit to accessing the following resources:

I am attaching a required letter of support from _____

(a signed letter of support from family/friend to show evidence of your support system)

ACADEMIC SUSPENSION PERSONAL STATEMENT

Please type and attach your personal statement.

Paragraph 1: Introduce yourself, your degree, and explain extenuating circumstance that led to your suspension.

Paragraph 2: Detail 1st term of warning where your GPA fell below a 2.0 and/or your completion rate dropped below a 67%

- State the term and reasons for unsuccessful completion of courses
- Explain your documentation included to support your statement
- Explain details to prevent circumstance from occurring again

Paragraph 3: Detail 2nd term of suspension where your GPA fell below a 2.0 and/or your completion rate dropped below a 67%

- State the term and reasons for unsuccessful completion of courses
- Explain your documentation included to support your statement
- Explain details to prevent circumstance from occurring again

If applicable provide additional paragraphs for additional terms suspended.

Closing Paragraph: Discuss your future plans for successful terms and detail specifics to ensure success (i.e. course load, less work hours, change of major).

MAXIMUM TIME FRAME SUSPENSION PERSONAL STATEMENT

Please type and attach your personal statement.

Paragraph 1: Introduce yourself, your degree, and explain extenuating circumstance that led to your suspension.

Paragraph 2: Provide a detailed explanation of your major change, transfer from another institution, and/or if you are pursuing an additional degree.

Paragraph 3: Provide your plan for graduation.

Paragraph 4: Provide reasons that have prevented you from completing your program in a timely manner.

ACADEMIC PLAN

You must complete your academic plan for graduation. Complete each box for each semester that you plan to enroll.

Fall Semester_____		
Course Name and Number	Credits	Total Credits

Spring Semester_____		
Course Name and Number	Credits	Total Credits

Summer Session_____		
Course Name and Number	Credits	Total Credits

Fall Semester_____		
Course Name and Number	Credits	Total Credits

Spring Semester_____		
Course Name and Number	Credits	Total Credits

Summer Session_____		
Course Name and Number	Credits	Total Credits

I will graduate Fall Semester _____ Spring Semester _____ Summer Session _____

NOTES:

REENROLLMENT REQUIREMENTS

If your appeal is approved, you will be placed on probation.

You are required to meet the following:

- ✓ Earn the minimum term standards (2.5 GPA and 100% Completion)
  (REQUIRED for Financial Aid Suspensions and Academic Suspensions)
- ✓ Enroll only in courses required by your academic program
  (REQUIRED for all suspensions)

You are encouraged to:

- ✓ Enroll for no more than 2 courses (Note: A lecture with lab is considered one course)
- ✓ Repeat courses where you previously earned a D or F grade

By signing below I certify my understanding that 1) if my appeal is approved, I will agree to adhere to all conditions listed in the determination notification and 2) if I choose not to attend classes at MCTC, I understand I am responsible for dropping my classes by the drop deadline and will be responsible for any charges.

Signature: _____ Date: _____

SUBMISSION OF APPEAL

- ☐ I completed all relevant pages of this appeal form.
- ☐ I attached all documentation that supports my appeal.
- ☐ I attached a signed letter of support.
- ☐ I attached my personal statement.

You may submit your appeal and documentation in person to:
Student Services (T.2200)
Phone: 612-659-6282

If you are unable to submit in person, you may send your appeal and documentation to:
Fax: 612-659-6710
Email: suspension.appeals@minneapolis.edu
Website: https://www.minneapolis.edu/saphelp

NOTIFICATION OF OUTCOME

You will be notified of your appeal outcome to your college issued e-mail address and personal e-mail address on college record. Please check eServices to ensure that your personal information is updated.

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