

2025-2026 Satisfactory Academic Progress Appeal

Deadlines to submit SAP appeal:

For Fall 2025 – December 1, 2025 For Spring 2026– April 20, 2026 For Summer 2026 – July 24, 2026

The U.S. Department of Education requires UT Permian Basin to establish and apply reasonable standards of satisfactory academic progress for eligible students to receive financial assistance under the programs authorized by Title IV of the Higher Education Act. UT Permian Basin students who wish to be considered for federal student aid must maintain satisfactory academic progress as set forth in this policy. Satisfactory Academic Progress is a federal student aid eligibility requirement that is administered by the University, in addition to the academic standards of performance required under the UT Permian Basin Academic Progress Policy. Satisfactory Academic Progress is determined at the end of every term/pay period by the Office of Financial Aid and Scholarships. This policy also applies to state and institutional financial aid. Please Review the Satisfactory Academic Progress (SAP) Policy and Appeal process outlined at <https://www.utpb.edu/admissions-aid/financial-aid/docs/satisfactory-academic-progress-policy-andprocedures-updated-18-19.pdf> to determine if you are eligible to appeal for financial aid.

SAP standards by student classification	
Undergraduate Students / Post Baccalaureate	2.0 Cumulative GPA/67% completion rate
Graduate Students	3.0 Cumulative GPA/67% completion rate
Maximum Timeframe	
Bachelor Degree	180 hours(120 x 150% = 180 hours)
Graduate Degree	54 hours(36 x 150% = 54 hours)
Certification	21 hours (21 x 150% = 31 hours)

Appeal Process

1. Submit this signed application and supporting documentation to; (in person or mail) ATTN: Financial Aid Office, University of Texas Permian Basin 4901 E. University Blvd., Odessa, Texas 79762, and (email) SAP@utpb.edu.
2. An appeal reviewed by the committee does not guarantee reinstatement of financial aid.
3. Financial Aid eligibility is determined by the number of hours a student is enrolled in. In order to move forward with the review of your appeal, please ensure that you are enrolled for the current semester.
4. Beware, if you currently have any WIFU's in the current semester you are Appealing. It will be Automatically Denied.
5. The SAP Committee will review your appeal and substantiating documentation.
6. You will be notified via email of the SAP Committee's decision within approximately fifteen (15) business days. If you have any questions concerning the appeal process, please contact our office at (432) 552-2620. Information about the SAP policy may be viewed at www.utpb.edu.

If you wish to be considered for reinstatement of financial aid, **you must submit a minimum of five pages** which will include.

- **The application** - confirm all data is provided.
- **Updated degree plan** - Obtained from advisor.
- **Appeal letter** - the first paragraph should explain in detail, the reasons that affected you to fall below SAP standards. The second paragraph will explain what you have done to correct the issues that prevented you from meeting the SAP standards. The last paragraph will cover your understanding (including specific SAP details) of why you are under SAP standards and a detailed plan to meet SAP standards.
- **Supporting documents** - provide any documentation that supports your reasoning of not meeting the SAP standards and compelling evidence that you are now able to make significant strides academically (could be multiple pages), such as documentation from a medical professional, death/birth certificate, etc. Documentation needs to be submitted by Deadline per semester.
- **Guidelines for Appeal Letter:** Be as detailed as possible and explain how your documentation supports your circumstances.
 - 1) **Explain in detail** when and what the issues were that affected your ability to meet SAP standards?
 - 2) **How** did you resolve the issue and **what** you are doing to prevent this from happening again?
 - 3) **Explain in detail** what you understand of why you are on SAP and **describe** in detail the plans to meet the SAP standards. 4)

Attach an updated and signed degree plan.



UT PERMIAN BASIN™
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2025-2026 Satisfactory Academic Progress Appeal

Student Name: _____
(Last, First, MI)

Student ID: _____

Reason for SAP Appeal: Please check all that apply to you

Completion rate less than the required 67%

Cumulative Undergraduate Grade Point Average (GPA) below 2.0, Graduate GPA below 3.0

Circumstances have changed and my academic plan needs to be revised (Maximum Time Frame)

Have you submitted a SAP appeal before? No _____ Yes _____

For what semester are you requesting an appeal: Fall 2025 _____ Spring 2026 _____ Summer 2026 _____

What degree are you working toward (indicate only one):

☐ First Undergraduate ☐ Second Undergraduate ☐ Teacher Certification ☐ Graduate

Nature of Appeal:

Indicate which situation best describes the causes of your academic difficulty:

- ☐ **Medical:** If a personal medical problem contributed to your failure to maintain satisfactory academic progress, attach documentation from a medical professional from whom you received advice or treatment. **Death/Illness:**
- ☐ If the death or illness of an immediate family member contributed to your lack of academic progress, please attach appropriate copies of medical records, or a death certificate.
- ☐ **Military Service:** If you have withdrawn due to military service, provide documentation.
- ☐ **Second Undergraduate Degree:** If you have attempted more than 180 hours due to working on a second degree, provide a personal letter explaining when you will graduate with your second degree.
- ☐ **Other circumstances:** Please clearly state the circumstances (not listed above) in your appeal letter and provide appropriate documentation.

Note: Circumstances related to the typical adjustments to college life such as working while attending school, financial issues related to paying bills and car maintenance/travel to campus, are NOT considered extenuating for the purpose of appealing the suspension of financial aid.

Student Acknowledgement's of Appeal Results (Read and Initial)

_____ If my appeal is **DENIED**, I understand that decisions are processed on a case-by-case basis and the committee may deny any SAP appeal. I also understand that the decision of the appeal committee is final.

_____ If my appeal is **APPROVED**, I recognize that I will be at a probationary status **AND** am expected to make academic progress as detailed in the appeal acknowledgment form within the term for which the appeal has been approved.

By submitting this document, I understand that if I do not meet these requirements I will be ineligible to receive financial aid and will be responsible for payment toward my student bill until I meet the satisfactory academic progress standards.

Certification and Signature

I certify that all information reported on this form and in my supporting documentation is complete and correct.

Student's Signature: _____

Date: _____

Office of Financial Aid & Scholarships

For use by University Officials only

Please Verify that all required components of the application for the appeal are included.

 Letter concerning nature of appeal ☐ Signed Degree Plan ☐ Supporting Documentation Checked by: _____

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Office of Financial Aid & Scholarships
2025-2026 Satisfactory Academic Progress Academic Plan

Student Name: _____ Student ID: _____
(Last, First, MI)

Completing this Form

- Complete this form with your academic advisor.
- Please submit a Signed Degree Plan attached to this document.
- Read an initial each statement in the Terms and Conditions.
- If this academic plan is a revision or update of an existing academic plan, you must provide a written statement explaining the reason why you are changing your academic plan.
- If you already have an academic plan and on suspension again, **DO NOT COMPLETE** this worksheet. You will need to complete an appeal worksheet again.
You **MUST** retain a copy of this academic plan for your records.

Terms and Conditions

Initial each statement indicating you understand and accept the terms and conditions of the academic plan.

_____ I will not withdraw/drop a class on this academic plan without consulting with my Academic Advisor and understand that my current academic plan must be revised if I withdraw from classes.

_____ I will receive a grade of "C" or better in all classes. If my major requires a higher minimum grade, I will maintain those grading standards. Incompletes are NOT allowed.

_____ I understand that I cannot change my major and that this academic plan is only valid for the major listed on page 4.

_____ I understand that I may only take the classes outlined exactly in my academic plan and that any classes taken outside of my academic plan could cause me to lose financial aid eligibility.

_____ I understand that I must submit a personal written statement to the Financial Aid Office if my academic plan needs to be revised that explains what has happened to make the change(s) necessary and how I will be able to make academic progress based on these changes. I understand that revised academic plans may still adversely affect my continued eligibility for financial aid.

_____ I understand that failure to follow this academic plan may result in the cancellation of financial aid from University of Texas Permian Basin.

_____ If I feel that I am in danger of not completing the requirements of this academic plan, I agree to contact my academic advisor and a the Financial Aid Office to discuss my situation and options.

Office of Financial Aid & Scholarships

Academic Plan to be Completed by Academic Advisor

[illegible]