



# Satisfactory Academic Progress (SAP) Academic Recovery Plan

Student's Name \_\_\_\_\_ Student ID \_\_\_\_\_  
Last First

Students who have been placed on Financial Aid Suspension due to failure to meet requirements for Satisfactory Academic Progress (SAP) are required to meet with their Academic Advisor or School Dean and be placed on an *Academic Recovery Plan* in order to regain eligibility for financial aid.

To meet SAP, students are required to (see Academic Catalog for full policy):

- Maintain a minimum cumulative GPA of 2.0 as an undergraduate (1.85 for students who have completed fewer than 30 credit hours) or 3.0 as a graduate/doctoral
- Complete at least 67% of all courses attempted as an undergraduate or 75% of all courses attempted as a graduate
- Complete their degree program within a maximum timeframe of 150% of the published length of the program

Student Type:  Undergraduate  Graduate  Doctoral

Wayland Campus: \_\_\_\_\_

Program/Major: \_\_\_\_\_

*** Section to be completed by Academic Advisor/School Dean ***	
<b>Academic Advisor/School Dean:</b>	
<b>Phone:</b>	<b>Email:</b>
Has the student been placed on a degree plan and/or been provided with any additional guidance regarding the successful completion of their degree requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the student making reasonable progress towards their degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	
What is the anticipated graduation date for the student? _____	
Please describe the <i>Academic Recovery Plan</i> uniquely created for and discussed with this student (attach sheet if necessary). This plan should outline the student's academic goals for future terms as well as resources to be used by the student (if needed) to ensure the best chance of success in the classroom and measurable progress towards degree completion.	
- - - Please provide student with a copy of their most current Degree Plan - - -	

I understand that the intent of this plan is to encourage successful completion of a degree program by the student with accountability and guidance from the Academic Advisor and bring the student into compliance with the university's Satisfactory Academic Progress policy. By signing this document, I am agreeing to meet all stipulations of this plan to the best of my ability.

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

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_