

Florida Agricultural and Mechanical University

Tallahassee, Florida 32307-3100

DIVISION OF STUDENT AFFAIRS OFFICE OF FINANCIAL AID

TELEPHONE: (850) 599-3730 FAX: (850) 561-2730 financialaiddocs@famu.edu

Satisfactory Academic Progress (SAP) for GRADUATES Request for Reinstatement of Financial Aid

This form must be completed by students who are currently on a Satisfactory Academic Progress (SAP) hold and are requesting consideration for a higher degree under the SAP Policy. Please ensure the completed form is submitted to the Office of Financial Aid before the start of the term for processing.

Student Name		Student ID#		
FAMU E-mail Address				
Mailing Address				
			State	Zip
Home Phone	Cell	/Alternate Phone		
Complete if your Master's I	Degree is from FAM	IU.		
Select if seeking a	a Second Master's Deg	ree.		
Select if seeking a	a Doctoral Degree.			
Complete this section if you	r SAP status is due	to the Maximum Time Fra	me.	
# of Hours comp	leted in graduate progr	am.		
PLEASE NOTE: Submission	of this form does not a	automatically reinstate your f	inancial aid.	
Student Printed Nan	ne	Student Signature		ate
PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.				
SAP Appeals Committee Only: Reinst	atement Approved	Reinstatement Denied	Date	
Notes/Comments:				