



Financial Aid Satisfactory Academic Progress (FASAP) Graduation Plan

Steps to Completing a Graduation Plan for Financial Aid Satisfactory Academic Progress

1. If you are a first-semester transfer student, view your transcript to ensure that all credits from previous institutions have transferred as you expected. If you believe there are omissions, see the campus Admissions Office.
2. Identify all degree requirements you have not fulfilled including your general education requirements.
3. Map out all of the courses you need to graduate in the order you plan to take them. If there are courses required or a specific GPA required for admission to your major, consider those in your plan.
4. Submit your completed Graduation Plan to your faculty advisor for review and approval.
5. Once you have your advisor's approval, submit your plan to the Financial Aid Office.

Student's Name _____ XXX-XX _____
 last four of SS#

Current Program of Study _____ Estimated Graduation Date _____

Degree(s) Earned and/or Previous Major(s) *(if applicable)*
 1. _____ 2. _____

Fall Semester: 20 _____		Spring Semester: 20 _____		Summer Semester: 20 _____	
Course Number	Hrs	Course Number	Hrs	Course Number	Hrs

Fall Semester: 20 _____		Spring Semester: 20 _____		Summer Semester: 20 _____	
Course Number	Hrs	Course Number	Hrs	Course Number	Hrs

Comments:

Student Signature _____ Date _____ Advisor's Signature _____ Date _____

Note: You may visit the Financial Aid Office to complete an electronic form.

FASAP Appeal Committee Decision

Appeal Term _____ Current Academic Year _____ cum GPA _____ Hrs Attempted _____ Hrs Earned _____

Appeal Considered Based on:

_____ Seeking Second Undergraduate Degree

_____ Change of Major

_____ Seeking Teacher Certification

_____ Other _____

Appeal Complete: Y ___ N ___ (If no document system. Return with denial or request additional information.)

Appeal Denied: Y ___ N ___ Reason for Denial _____

Appeal Approved with graduation plan: Y ___ N ___

Graduation plan criteria and/or additional stipulations: _____

FASAP Committee Signature _____ **Date** _____

If applicable 2nd Level Committee Review Results: _____

FASAP Committee Signature _____ **Date** _____

System Comment _____ Awards Updated _____ FASAP Status Updated _____ FAO Initials _____