

SAP Academic Plan

Student Name: _____ Student ID Number: _____

Program Counselor: _____ Program/Degree: _____

Number of credits needed to regain financial aid eligibility (obtain from the Financial Aid Office): _____

Your appeal for extenuating circumstances for not meeting satisfactory academic progress has been approved. To regain eligibility, establish this Academic Plan with your Program Counselor. It determines the remaining courses for you to graduate from your program and/or meet satisfactory academic progress as well as when those courses will be taken. If you follow the terms of the Academic Plan; have a **term** GPA of 2.0; have a **term** percentage of completion of 67%; and are able to meet satisfactory academic progress before you graduate, you will be considered meeting satisfactory academic progress. *Failure to follow the Academic Plan will result in a loss of financial aid (which includes grant, work-study, and student loans).* Should a need arise to change the Academic Plan, or if you fail to meet the terms of the Academic Plan, you will be allowed a **one-time** appeal. After that, you will lose all financial aid eligibility.

1. Discuss Resources available for success

To Be Completed by Program Counselor: Discuss and indicate available resources to improve academic performance, such as:

- | | |
|--|---|
| <input type="checkbox"/> Peer-Tutoring | <input type="checkbox"/> Multicultural & Diversity Services |
| <input type="checkbox"/> Attend Study Groups | <input type="checkbox"/> Financial Coach (920-693-1835) |
| <input type="checkbox"/> TRIO Program | <input type="checkbox"/> Manitowoc County Job Center |
| <input type="checkbox"/> Academic Support Center | <input type="checkbox"/> Sheboygan County Job Center |
| <input type="checkbox"/> Career Placement Services | <input type="checkbox"/> Manitowoc County Health & Human Services |
| <input type="checkbox"/> Accommodations Services | <input type="checkbox"/> Sheboygan County Health & Human Services |

Meet one-on-one with instructor ☐ Other _____

2. Determine required courses and when you will take each one

Create an Academic Plan using the attached template (or use similar document) to list as many courses needed to reach satisfactory academic progress, which could potentially be until you graduate. Reference beginning of this form for the number of credits needed. In your decision:

- Only list courses required for your program/degree. If taking classes not required, still list them, but indicate they are not required (and won't be eligible for financial aid).
- Ensure you have met the prerequisites for the classes.
- Ensure your schedule has balance.
- Consider your work schedule and other commitments.
- **If a semester is open for registration, you must be enrolled according to your plan before your plan can be approved.**



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Need Assistance?

Contact the Financial Aid Office 1290 North
Ave Cleveland, WI 53015
Toll Free: 1.888.GOTOLTC, ext. 1718
Email: financial.aid@gotoltc.edu
Fax: 920-693-1834

I understand that if I fail to meet the *Cumulative Standards of Progress* or fail to follow the requirements of the *Academic Plan*, my financial aid will be suspended and will not be reinstated until I have:

- Completed at least 67% of total credits attempted; and
- Achieved and maintained a cumulative GPA of 2.0 or higher

I agree to not take any fewer or any additional classes than what is listed on this Academic Plan.

I understand that if my financial aid is not reinstated that I am responsible for any tuition or fees.

Student Signature: _____ Date: _____

Program Counselor Signature: _____ Date: _____

Physical Signatures Required

Return completed form to the LTC Financial Aid Office.

The financial aid office will consider your explanation and documentation during the review of the appeal. After a decision is made, you will be notified via your Lakeshore student email.

Office Use Only:

☐

Approved

☐

Not Approved

Staff initials: _____

Date: _____

Catalog Number	Class Name	Number of Credits	Semester Taking Class