Federal regulations require that students make Satisfactory Academic Progress (SAP) towards the completion of their degree in accordance with the school’s SAP policy. The University at Buffalo’s Satisfactory Academic Progress policy is available online at: [http://financialaid.buffalo.edu/process/student-eligibility/sap/](http://financialaid.buffalo.edu/process/student-eligibility/sap/)

Per federal Satisfactory Academic Progress regulations, a student must complete his/her degree requirements within 150% of the published time frame for degree completion. For example, if a degree program requires 120 credit hours, the student would be required to complete his/her degree requirements within the maximum time frame (MTF) of 180 attempted credit hours:

\[
120\text{ credit hours for degree } \times 150\% = 180\text{ attempted credit hours to complete degree requirements}
\]

(*Programs that exceed 120 credit hours are adjusted according to the UB catalog.)

All transfer credits are notated on the University at Buffalo academic transcript. However, the academic transcript may not accurately reflect the number of credit hours accepted by the student’s program towards the degree and general education requirements. If the total number of attempted credit hours (transfer and UB credits) meets or exceeds 180, a student is deemed ineligible for federal financial aid.

A student may appeal the loss of his/her financial aid eligibility due to excess transfer credit hours that cause the student to meet or exceed the maximum time frame (MTF) only if the following conditions are met:

- The total number of transfer credits is equal to or exceeds 30
- The student is accepted into a degree program, “intended” majors are not eligible
- The student is meeting the GPA and Pace requirements which are available to review at the links below
  - Undergraduate: [http://financialaid.buffalo.edu/process/student-eligibility/sap/undergraduate/](http://financialaid.buffalo.edu/process/student-eligibility/sap/undergraduate/)
  - Graduate: [http://financialaid.buffalo.edu/process/student-eligibility/sap/graduate/](http://financialaid.buffalo.edu/process/student-eligibility/sap/graduate/)
  - Pharmacy: [http://financialaid.buffalo.edu/process/student-eligibility/sap/pharmacy/](http://financialaid.buffalo.edu/process/student-eligibility/sap/pharmacy/)

**Instructions:**
Complete pages 2 and 3 of the appeal form and attach any supporting documentation. Please be advised that incomplete applications or applications lacking sufficient documentation and signatures will be denied. Submission of this form does not guarantee the reinstatement of your financial aid eligibility. You will be notified via email of the outcome within 2-3 weeks of appeal submittal.

**Return to:**
Financial Aid at 1Capen
University at Buffalo
Attn: Bill Rudick
Capen Hall
Buffalo, NY 14260-0001
Part 1: Student Information

Student Name: ___________________________________________ UB Person # __________________________

Permanent Address: ____________________________________________________________________________

UB E-mail Address: ___________________________________ Daytime Phone: (____) ___________________________

Anticipated Graduation Date: ______________________________

Semester for which application is being submitted: ______________________________

I understand that completing this form does not guarantee the reinstatement of federal financial aid. If my appeal is approved, I understand that I may only receive funding for the course work listed on part III.

I have also read and understand the University at Buffalo’s Satisfactory Academic Progress Policy and Federal Financial Aid Requirements which are available online at: http://www.financialaid.buffalo.edu/process/sap.php.

__________________________________________ __________________________
Student’s Signature Date

Part 2: Academic Plan (to be completed by an Academic Advisor)

1. Approved Major/Degree Program: _____________________________________________________________

2. Total number of credit hours required for the degree listed above: ______________

3. Student’s anticipated graduation date (Ex. Spring 2019): ______________

4. Total number of transfer credits currently listed on academic transcript: ______________

5. Total number of transfer credits NOT being utilized to meet degree and general education requirements: ____

Please also complete Part 3 of the Transfer Credit Appeal Form. You may attach additional sheet(s) if necessary. Please be sure to include the student’s name and Person number, as well as your signature and date on additional attachments.

_________________________________________ __________________________
Academic Advisor (Please Print) Date

Academic Advisor Signature ___________________________ UB Email Address ___________________________
_________________________________________ Phone Number
Part 3: Remaining UB Courses (to be completed by an Academic Advisor)

Student Name: __________________________________________  Person Number: ______________________

List the *remaining* UB courses required for degree completion (attach an additional sheet if necessary):

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<thead>
<tr>
<th>Course Title</th>
<th>Number of Credit Hours</th>
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Total Number of credit hours required for degree completion

Advisor Signature: __________________________________________  Date: ______________________