



**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 \_\_\_\_\_

**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 2<sup>nd</sup> Level Committee Review Results: \_\_\_\_\_

FASAP Committee Signature \_\_\_\_\_ **Date** \_\_\_\_\_

System Comment \_\_\_\_\_ Awards Updated \_\_\_\_\_ FASAP Status Updated \_\_\_\_\_ FAO Initials \_\_\_\_\_