



SATISFACTORY ACADEMIC PROGRESS APPEAL/ ACADEMIC RECOVERY PLAN CULMINATING PHASE

Our records indicate that you have reached your maximum time frame for completion of your Project, Thesis or Dissertation. Together with your Chair you must carefully evaluate your current progress and develop a timeline for completion. The plan you describe will represent an appeal of your current Financial Aid/Academic Suspension that, if approved by your Dean, amends the maximum timeframe within which to complete your degree program. If authorized, you will be placed on Financial Aid/Academic Probation for the duration of the period of time that is authorized here. Should you not complete your program requirements by the end of the authorized period, you will resume Financial Aid/Academic Suspension without possibility to appeal. For full details about current SAP standards, please see the current *Academic Catalog*.

It is YOUR responsibility to ensure this form is submitted to the Registrar’s Office prior to the start of the following semester. Failure to submit an Academic Recovery Plan by this deadline can result in ineligibility for federal financial aid and administrative withdrawal.

SECTION I: STUDENT INFORMATION (To be completed by the student)	
Name:	Program:
Saybrook Email:	Student ID:
Preferred Phone:	Dissertation Chair Name:
Current Academic Standing:	Department Chair Name:

SECTION II: Completion Plans
Outline your timeline for the completion of your Project, Thesis or Dissertation.

SECTION III: Comments (To be completed by the Chair)
Enter any comments related to the proposed timeline

SECTION IV: STUDENT ACKNOWLEDGMENT AND APPROVALS

By signing this document, I agree to the terms outlined in this Academic Recovery Plan. I understand that my financial aid eligibility and my academic success at Saybrook is dependent upon meeting all SAP standards. Failure to meet all requirements as outlined in this ARP may result in loss of Financial Aid and/or Academic Dismissal.

Student Signature:

Date:

Dissertation Chair Signature:

Date:

Department Chair Signature:

Date:

College Dean Signature:

Date:

Registrar Reviewed:

Date Processed: