



**Financial Aid Office**  
 5150 N. Maple Avenue, M/S JA 64  
 Fresno, CA 93740-8026  
 Phone: (559) 278-2182 Fax: (559) 278-4833

## Satisfactory Progress Petition

STUDENT ID	LAST NAME	FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

**INSTRUCTIONS:** On a separate sheet, please provide a **signed statement**, which includes the following:

- ❖ Explanation of the circumstances which prevented you from meeting your contracted units
- ❖ Address **each** semester in which you fell short of your contracted units
- ❖ Explain how your circumstances have changed
- ❖ Your proposed plan to keep yourself from "disqualification status" again
- ❖ Attach all applicable documentation in support of your appeal

**ATTACHED DOCUMENTATION:** (if applicable)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Death Certificate | <input type="checkbox"/> Police Report / Court Documents | <input type="checkbox"/> EOP/UMS Recommendation    |
| <input type="checkbox"/> Medical Statement | <input type="checkbox"/> Counselor Statement             | <input type="checkbox"/> Recommendation from _____ |
| <input type="checkbox"/> Other _____       | <input type="checkbox"/> Academic Advisor Statement      | <input type="checkbox"/> _____                     |

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Petition Number _____	<b>OFFICE USE ONLY BELOW THIS LINE</b>	<input type="checkbox"/> MAX Needed <input type="checkbox"/> MAX Submitted
EOP STUDENT <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> MAX Approved _____
Reason for Disqualification _____		

**PREVIOUS PETITION INFORMATION: INCLUDE ----- DATE / ACTION / REASONS / FOR EACH PRIOR PETITION**

RECOMMENDATION      FWD BY:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Counselor Action | <input type="checkbox"/> Director Action         | <input type="checkbox"/> Date _____       |
| <input type="checkbox"/> Committee Action | <input type="checkbox"/> Agree w/ Recommendation | <input type="checkbox"/> Temporary Waiver |

<input type="checkbox"/> Request was <b>APPROVED</b> : waived to <input type="checkbox"/> probation <input type="checkbox"/> target <input type="checkbox"/> Contingency: <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Request was <b>DENIED</b> : (see comments) <input type="checkbox"/> Petition pending (see comments) <input type="checkbox"/> <b>Units Waived</b> _____ <b>Comments/Conditions</b> _____ _____
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