



Satisfactory Academic Progress (SAP) Appeal Maximum Timeframe Form

Office of Financial Aid
130 Student Union
3640 Colonel Glenn Hwy.
Dayton, OH 45435-0001
Phone: (937) 775-4000
E-mail: raiderconnect@wright.edu
FAX: (937) 775-4410

Student Name: _____

University ID (UID): U [] [] [] [] [] [] [] [] [] [] [] []

Phone Number: () _____

Your signature on this form certifies that you have met with your academic advisor at Wright State University regarding your anticipated graduation date listed below.

Student Signature: _____ Date: _____

Note to Academic Advisors:

In order to receive federal student aid at Wright State University, federal regulations require students meet Satisfactory Academic Progress (SAP) requirements. Students who did not meet the Maximum Timeframe requirement must meet with an academic advisor to map out their anticipated graduation date for their declared major or program, and the academic advisor must sign and complete this SAP Appeal Maximum Timeframe Form.

Detailed explanations of all SAP requirements may be found on Raider Connect's website: https://www.wright.edu/raider-connect/financial-aid/academic-progress

Maximum Timeframe (150% Rule)
Students must complete their program of study within 150% of the standard timeframe required to earn their degree. The maximum timeframe is 150% of the number of credit hours needed to complete degree requirements.

Table with 2 columns: Student Level and/or Degree Program, Maximum Number of Total Attempted Credit Hours. Rows include Undergraduate / Associate's Degree (90), Undergraduate / Bachelor's Degree (180), Graduate* (55), and Doctoral* (136).

*Includes research and thesis/dissertation hours

TO BE COMPLETED BY STUDENT'S ACADEMIC ADVISOR

Student's Declared Major: _____ Degree: _____ Anticipated Graduation Date: _____

Please check the box that best explains why the student is outside the maximum timeframe:

- Transfer Hours, Changed Major, Second/Additional Degree, Other Circumstance

Comments: _____

Advisor Name: _____ E-mail Address: _____@wright.edu

Advisor Signature: _____ Date: _____

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RRAAREQ GRADUATION STAFF MEMBER
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