SATISFACTORY ACADEMIC PROGRESS PLAN

Students whose cumulative grade point average is below a 2.0 are required to compete a Satisfactory Academic Progress PLAN (SAP PLAN). A completed SAP PLAN will provide an outline of your upcoming semester(s). For each course listed, the SAP PLAN will include the anticipated grades necessary to help you achieve a 2.0 GPA or higher.

In order to complete the SAP PLAN, you will need to contact Nikki Peters, Director of Enrollment Management, for guidance, as an approved SAP PLAN can only include degree-required coursework. Nikki can be reached via email, npeters@allencc.edu, or by phone, (620) 901-6255. Once your SAP PLAN has been approved, Nikki will submit a copy to the Office of Financial Aid.

NOTE: **For students who are also required to complete a Satisfactory Academic Progress Appeal**, the SAP PLAN should _only_ be completed if your SAP Appeal is approved. If the SAP Appeal is denied, you will not be eligible for federal financial aid during your next semester of enrollment. **All SAP Appeals and SAP PLANs are due no later than <u>one week prior to the first day of the semester of enrollment for which you wish to be considered.</u>**

February 2022

Academic Advising Plan

Student Name: _____   ID#: _____

Semester: _____

Course Number	Credit Hours	Anticipated Grade

Semester: Hours: _____   Points: _____   GPA: _____

Cumulative: Hours: _____   Points: _____   GPA: _____

Semester: _____

Course Number	Credit Hours	Anticipated Grade

Semester: Hours: _____   Points: _____   GPA: _____

Cumulative: Hours: _____   Points: _____   GPA: _____

Semester: _____

Course Number	Credit Hours	Anticipated Grade

Semester: Hours: _____   Points: _____   GPA: _____

Cumulative: Hours: _____   Points: _____   GPA: _____

Semester: _____

Course Number	Credit Hours	Anticipated Grade

Semester: Hours: _____   Points: _____   GPA: _____

Cumulative: Hours: _____   Points: _____   GPA: _____

I understand that this is a draft plan subject to change based on availability of classes. It is my responsibility to contact and meet with my advisor.

Student Signature:_____**Date:** _____

Advisor Signature:_____**Date:** _____

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