



2023-2024 Satisfactory Academic Progress (SAP) Appeal - Academic Plan

Last Name _____ First Name _____ Coyote ID _____

Current Major _____ Phone Number (include area code) _____

Grade Level: Undergraduate Graduate/Masters Teaching Credential Post-Bac/2nd Bachelor's Ed Doc

**An Academic Plan is needed for excessive unit appeals.
 IMPORTANT: Academic Plan must be completed by the Academic Advisor, not by the student,**

Academic Advisors may attach a separate sheet of paper to this form for additional classes needed per term.

Fall 20____ Required Courses	Units

Summer 20____ Required Courses	Units

Spring 20____ Required Courses	Units

This section must be completed by Academic Advisor:

TOTAL Additional Units needed for Graduation: _____

Expected Graduation (Program Completion) Term:

Summer 20__ Fall 20__ Spring 20__

Is student cumulative GPA below 2.0? Yes No

IF YES:

Min. GPA per term needed to meet cum 2.0 GPA required? _____

We certify the courses listed above are the remaining required courses for completion of degree requirements (general education/major).

NOTE: Signature must be from an academic advisor, faculty, or department chair. Signature from Peer Advisor will not be accepted.

Student's Signature: _____ Date: _____

Name of Academic Advisor (PRINT): _____ Date: _____

Advisor's Signature: _____ Ph#/email _____