



WHEELING UNIVERSITY
Satisfactory Academic Progress (SAP)
Academic Improvement Plan (AIP)

Name: _____ Student ID #: _____

Address: _____
_____ Cell Phone #: _____

Major: _____ Other Phone : _____

(Circle One) Spring: Year: 20____ Fall: Year: 20____ Cumulative GPA: _____ # of Credits Earned: _____

Satisfactory Academic Progress Standards

The Satisfactory Academic Progress Policy is available on the financial aid website:
wheeling.edu/admissions/financial-aid/

Student academic progress is reviewed at the end of each semester.

- Qualitative measure: Student’s Cumulative Grade Point Average (GPA) must be 2.0 or greater.
- Quantitative measure: Students must successfully complete 66.67% of all classes they attempt.
(66.67% Rule – Earned hours ÷ Attempted Hours)
- Maximum Time Frame: Students are allowed to attempt no more than 150% of the classes required to earn a specific degree or credential.
Example: If completing the degree requires 120 credit hours, the attempted credit hours must be 180 or less (120 credits x 1.5 = 180 credits)
- **Pace Progression:** *Students must meet or prove they will be able to meet both the qualitative and quantitative measures at a pace that insures graduation prior to reaching the Maximum Time Frame threshold also referred to as “on track” to graduate. Students who cannot meet this requirement will not be approved.*

If you are BELOW THE MINIMUM GPA and/or BELOW THE 66.67% PACE of progression OR if you are EXCEEDING 15 Days within receipt of notice - Complete this section:

YOU MUST submit these documents to the Director of Financial Aid for review within 30 days of notification:

- You must submit your completed Satisfactory Academic Progress (SAP) Appeal Agreement (and any necessary supporting documentation, such as medical documentation, etc.) to the Office of Financial Aid.
- You must submit your Academic Improvement Plan to the Student Success Center.
- You must submit an updated Degree Audit from the Registrar’s Office. The Degree Audit must indicate what courses are needed to graduate and when you will take them.

Student Signature: _____ Date: _____



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Student Responsibilities: (You must initial each line)

- I agree to register for the classes I selected with the guidance of my academic advisor and as outlined in my Academic Improvement Plan, provided I am eligible to continue at Wheeling University.
- I agree to contact my academic advisor immediately if I need to revise my Academic Improvement Plan.
- I agree to attend classes beginning with the first class of the semester.
- I agree to devote at least 2 to 3 hours of study time for every 1 hour of class time.
- I agree to use all Student Success Center services including tutoring, supplemental study skills workshops and counseling, as appropriate. I also agree to contact my instructor or my academic advisor if I am experiencing difficulty in classes.
- I understand that I have the responsibility to meet with my advisor throughout the semester to review my progress, and discuss any problems that arise.
- I understand that I must pass all of the courses that I have registered for under the guidance of my Academic Advisor, and that **I cannot receive a W, I or F in any courses without penalty.**

I understand that I have the responsibility to uphold my responsibilities listed in this agreement and agree to follow the Academic Improvement Plan that has been approved by the Director of the Student Success Center and by your faculty advisor. Failure to not meet Federal Financial Aid Satisfactory Academic Progress (SAP) requirements may result in the withdrawal of my financial aid eligibility.

Student Signature: _____ Date: _____

I approve this SAP agreement and Academic Improvement Plan, which, if followed, may allow the student to attain academic standing acceptable toward Wheeling University financial aid and graduation requirements.

Terms to achieve 2.0 UG, 3.0 GRAD GPA/66.67% pace: _____ (Semester(s), Year(s))

Graduation expected: _____ (Semester, Year)

Comments: _____

Financial Aid Administrator's Signature _____ Date _____

Director of Student Success Center's Signature _____ Date _____



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(Circle One) Spring: Year: 20 _____ *Fall: Year: 20* _____ *Cumulative GPA:* _____ *# of Credits Earned:* _____

Courses in which you received a letter grade of D, F, W and/or I's

Course	Grade	Semester	Course	Grade	Semester
1.			5.		
2.			6.		
3.			7.		
4.			8.		

Write a brief statement explaining your SAP/Academic Performance challenges (i.e. D's F's W's and/or I's).

Explain the actions you will take when meeting future challenges to ensure your academic success:

What factors may impact your academic success? Check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Lack of family support | <input type="checkbox"/> Financial concerns |
| <input type="checkbox"/> Personal health issues | <input type="checkbox"/> Family health concerns |
| <input type="checkbox"/> Job commitment | <input type="checkbox"/> Emotional/mental health concerns |
| <input type="checkbox"/> Substance abuse/drug related issues | <input type="checkbox"/> Judicial matters |
| <input type="checkbox"/> Death | <input type="checkbox"/> Lack of financial resources for books |
| <input type="checkbox"/> Other | |

How might you manage the above factors you checked?

How might the Student Success Center team assist you in being successful?

Student Signature: _____ **Date:** _____