



To appeal the loss of Federal and/or New York State financial aid, students are required to submit this appeal form and attach applicable documentation.

Ammerman Campus

Grant Campus

Eastern Campus

Attach a statement explaining the exceptional/unforeseen circumstances which resulted in not meeting the SAP requirements. The statement must include:

- specify the circumstances that affected your academic performance.
- when the circumstances occurred.
  - explain how and why the circumstances affected you.
  - explain how the circumstances have been resolved and/or will no longer affect your academic performance.

The following is not exhaustive and serves only to provide examples. If you cannot include documentation with your appeal, you must explain why supporting documentation is not available. Additional documentation may be requested in the future.

Check the condition(s) that apply and be sure to submit all required documents for each circumstance checked.

- Submit documentation on official letterhead from a health care provider indicating when you were affected by the medical condition and if the condition is resolved or ongoing. Documentation should include clearance to return to school and outline any restrictions you may have upon your return.

For chronic conditions, your provider should indicate if your condition is stable, or there is an established treatment plan, and it will not interfere with your academic progress in the future.

- If your medical condition was the result of a pregnancy or birth of a child, include a birth certificate.



Death certificate and/or copy of obituary. A notarized third-party statement may be required.

Personal statement must include your relationship to the deceased.

Court documents.

Lawyer's statement indicating representation in a divorce/separation proceeding.

Court documents and/or police records (i.e., notarized statements, restraining orders, etc.).

Explain why you have attempted so many credits and have not yet obtained a degree.

By signing below, I understand that all required information and documentation must be provided when submitting the Satisfactory Academic Progress Appeal initially.

I affirm that the information I provided, and any supporting documentation submitted, are true and complete.

I understand that I may be eligible for only one appeal each for federal and state aid. I also agree that I accept any academic restrictions indicated by the committee as a condition of the restoration of aid.

**Central Administration**  
533 College Road  
Selden, NY 11784-2899  
(631) 451-4108

**Ammerman Campus**  
533 College Road  
Selden, NY 11784-2899  
[faidamr@sunysuffolk.edu](mailto:faidamr@sunysuffolk.edu)  
(631) 451-4072

**Grant Campus**  
Crooked Hill Road  
Brentwood, NY 11717-1092  
[faidwest@sunysuffolk.edu](mailto:faidwest@sunysuffolk.edu)  
(631) 851-6712

**Eastern Campus**  
121 Speonk-Riverhead Road  
Riverhead, NY 11901-3499  
[faideast@sunysuffolk.edu](mailto:faideast@sunysuffolk.edu)  
(631) 548-2525

