

# Cloud County Community College Financial Aid Office

## 2021-2022 Academic Year – SAP Academic Plan Change Request

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In conjunction with your appeal for reinstatement of your federal financial aid, you were placed on an **Academic Plan** to make Satisfactory Academic Progress. Your **Academic Plan** is based off the number of hours required to complete your degree/certificate and your agreement to maintain **SAP Requirements**. **Complete this form to request a change to your Academic Plan.**

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Last Name

First Name

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CCCC ID# or SSN

Phone number (include area code)

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- I have met with my advisor and I have made a change to my degree/certificate seeking status. I am requesting that my Academic Plan be reviewed and updated.
  - I have included a Personal Statement stating what has influenced me to change my degree/certificate.
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### Student Certification:

- I understand that my **Academic Plan** has been updated and only the courses required for my **declared degree or certificate** will be eligible for Financial Aid.
- At minimum, I must maintain **semester** 2.0 GPA and 67% CR unless otherwise specified by the SAP appeal committee.
- I understand that I must also comply with the standards otherwise set forth by the *Satisfactory Academic Progress Policy*.
- I agree to abide by any special conditions the committee may specify to ensure success in my higher education endeavors.
- I understand what I must do to remain eligible for Financial Aid.

**By signing this form I understand the information contained within.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_