

Student Signature

ARRUPE SCHOLARSHIP APPEAL

Arrupe College of Loyola University Chicago

This form relates to Arrupe Scholarship. Student who are filing to retain state and federal must complete the Satisfactory Academic Progress (SAP) appeal found at www.LUC.edu/finaid/forms

Stud	ent Name:		Loyola ID: <u>0000</u>
	r to be reconsidered for fi an appeal with all necess		are not meeting the terms of their Arrupe Scholarship Agreement must
Appeal	should include all of the	ollowing:	
	An attached statement contributed to the lack illness, accidents, etc.) s	escribing the specific reason f meeting the satisfactory a ould be included. If the rea oll terms (or academic years	Plan (effective for the coming term). on(s) beyond your control (events and/or circumstances) that directly academic progress requirements. Specific dates of the events (in cases easons for the lack of meeting the academic requirements developed is), you should explain all circumstances that have contributed to not
3. 4.			al billing statement as proof of illness, etc.). firming a discussion of a plan of corrective action has taken place (see
Ple	ease list the documents y	u have attached to suppor	rt your appeal:
	Academic Improver	ent Plan (AIP)	
	2. Student statement		
	3		
For A	cademic Advisor to comp	ete:	
		t) ress. The written plan is i n	
Adviso	or Name (please print)		Title
Signat	ture		Date/
All of th	· · · · · · · · · · · · · · · · · · ·	me or any other person of of the information we hav	on this form is accurate and complete to the best of my knowledge. If ve provided on this form.

Date