

Office of Financial Aid

P.O. Box 1773 Carlisle, PA 17013-2896

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2023-2024 Satisfactory Academic Progress

Academic Summary

Meet with your Academic Advisor or the Dean of Academic Advising to complete the following section:

 Student's Name: ________
 Dickinson ID: _______

 1. Current Program of Study: ________

 2. Projected Graduation Date (mm/yy): ________

 3. Number of credits passed ______/attempted ______ = ____% completion rate

 4. Number of incompletes (I) ______ & Number of withdrawals (W) _______

 5. Number of credits earned which apply to the degree: _____ out of a total of _______

 6. Estimate the number of credits needed to fulfill your degree requirements: _________

 5. Plan end date - when student will be in good academic standing for continued aid eligibility: ______ (must be included)

Academic Advisor or Dean of Academic Advising's' Recommendation:

Upcoming Semester Benchmarks:

This section must be completed. These benchmarks must either get the student to meet all SAP requirements within the semester, or in a case where it is mathematically impossible to meet SAP; be realistic, achievable, and ascending benchmarks that ensure the student is progressing towards meeting SAP.

- 1. Semester GPA:
- 2. Number of credits to successfully complete:_____

Academic Advisor or Dean of Academic Advising Signature

I have met with the above-named student to complete an Academic Plan and the SAP Academic Summary.

Advisor's Name:	Date:	
Email:	Phone:	