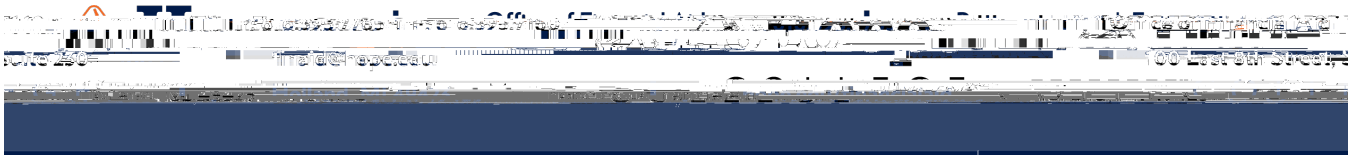

Satisfactory Academic Progress Appeal Form

Student Name: **Hope College ID Number:**

Student Signature: Date Signed:

(signature must be in ink)