

ACADEMIC APPEAL FORM

Please complete these instructions and submit this form and attachment(s) to the office for:
Academic Affairs: AC Building- Suite E

Academic Appeal Form: Suspension Probation

Name: _____ Date: ___/___/____ Social Security #: _____-____-_____

Address: _____

Phone: (Home) _____ (Cell) _____

E-mail Address: _____

Attach your transcript to this form and complete the following:

1. An unofficial transcript: You may obtain an unofficial transcript from the registrar's office.
2. Personal Statement: Complete all sections of this form (*Please type on separate sheet of paper*)
3. Meet with an academic advisor to create an academic plan for the next two semesters:

Semester: _____ Year: _____

Course	Section	Time	Day(s)	Instructor
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

_____/_____/_____
Advisor's Signature *Date*

Advisor supports this plan? **Yes** or **No**

Term appealed: _____

Approved: **Yes** **No**

_____/_____/_____
Student's Signature *Date*

PERSONAL STATEMENT

(Narrative needs to be typed and turned in with Appeal Application)

Student Name: _____ Social Security #: _____

Have you met with an academic advisor in the past prior to registering? **YES** **NO**
(Circle One)

- A. Define your educational and career goals.
- B. Why are you having academic problems?
- C. Describe your work and family responsibilities.
- D. If your appeal is approved, what actions do you intend to take to make college success more likely?

** Note that this process is separate and different from the Financial Aid Suspension Appeal Process.**