

ACADEMIC/PROGRESS DISMISSAL APPEAL PETITION

LAST NAME: _____ FIRST NAME: _____ A#: _____

EMAIL: _____ PHONE: () _____

LAST SEMESTER ATTENDED GPA: _____ CUMULATIVE GPA: _____ TOTAL UNITS ATTEMPTED: _____ TOTAL UNITS COMPLETED: _____

I. DISMISSAL STATUS: (CHOOSE ONE AREA BELOW) **TERM:** _____

- 1** I AM ON: ACADEMIC DISMISSAL **AND** I HAVE SAT OUT FOR AT LEAST ONE ACADEMIC SEMESTER
 PROGRESS DISMISSAL I WOULD LIKE TO ATTEND WITHOUT A LAPSE OF ENROLLMENT
- OR**

- 2** I HAVE: SUBMITTED MY ACADEMIC/PROGRESS DISMISSAL EXEMPTION AND I AM REQUESTING TO TAKE MORE THAN SEVEN UNITS FOR THE UPCOMING ACADEMIC SEMESTER

II. ALONG WITH THIS PETITION, YOU MUST SUBMIT THE FOLLOWING DOCUMENTS BELOW:

- PERSONAL STATEMENT: INCLUDE AN EXPLANATION OF YOUR PAST ACADEMIC CHALLENGES, EXTENUATING CIRCUMSTANCES IF ANY, AND THE CHANGES YOU'VE MADE TO ENSURE YOUR SUCCESS.
- ACADEMIC COMPREHENSIVE EDUCATION PLAN (MOST RECENT WITHIN 6 MONTHS)

III. SUPPORTING DOCUMENTATION

- UNOFFICIAL TRANSCRIPTS, MEDICAL DOCUMENTATION (OPTIONAL), ETC.

I DECLARE UNDER PENALTY OF PERJURY THAT ALL INFORMATION ON THIS FORM AND SUPPORTING DOCUMENTATION IS TRUE AND CORRECT.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

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| OFFICE USE ONLY | COMMITTEE REVIEW DATE: _____ |
| COMMITTEE DECISION: APPROVE: _____ DENY: _____ | |
| COMMITTEE/DIRECTOR COMMENTS: _____ _____ _____ | |
| DIRECTOR, ADMISSIONS & RECORDS SIGNATURE: _____ | |

