



Undergraduate Graduation, and Academic Credit Appeals Petition

Name (Last Name, First Name, Middle Initial)		Major	
College ☐ Agriculture ☐ Neil Griffin Business ☐ Education & Behavioral Science ☐ Engineering & Computer Science ☐ Liberal Arts & Communication ☐ Nursing & Health Professions ☐ Sciences & Mathematics ☐ Undergraduate Studies		Reason for Petition * ☐ Suspension (returning term _____ waive required time out) Term: _____ ☐ Late drop/Withdrawal <i>Student must document faculty notification for each course (see example below.) Include additional courses on a separate sheet of paper.</i> Example: <u>ACCT 2003</u> _____ Course (Faculty signature here) _____ Course (Faculty signature here) ☐ Upper Level Credit Issue ☐ Other(Please give brief description) _____	
*All supporting documentation (pertinent emails, medical records, etc.) should be attached to this petition along with a clear and detailed letter of explanation. Student is also required to provide a copy of his/her transcript along with the completed petition form. It is highly recommended that the student attend the scheduled Undergraduate Graduation, and Academic Credit Appeals Committee meeting.			
Campus ID Number		Phone Number	
Are you receiving or have you received VA benefits?		☐ Yes ☐ No	
Are you receiving or have you received Financial Aid?		☐ Yes ☐ No	
Are you currently or have you been a Student Athlete?		☐ Yes ☐ No	
Permanent Mailing Address (Street/Box/Apt)			
City	State	Zip Code	Country
University Email Address (Use if currently enrolled)		Personal Email Address (Use if not currently enrolled)	
Student Signature: _____		Date: _____	
Advisor Signature (Required): _____		Date: _____	
College Undergraduate Admission, Graduation, and Academic Appeals Committee Action: Comments: _____ _____ _____ _____ College Committee Chair's Signature: _____		College Recommendation: ☐ Approve ☐ Deny ☐ Other _____ _____ Date: _____	
<i>This section must be completed before the appeal can be placed on the University Committee Agenda.</i>			
University Undergraduate Admission, Graduation, and Academic Appeals Committee Action: Comments: _____ _____ _____ _____ University Committee Chair's Signature: _____		College Recommendation: ☐ Approve ☐ Deny ☐ Other _____ _____ Date: _____	