Appalachian State University

Office of the Registrar

First Semester/Zero GPA Suspension Appeal Request

	Student ID:				Today's Da	ite:				
First Name	e:	Middle	Name:			Last Nar	ne:			
Address					E-mail A	Address				
City		State Z	Zip Code		Phone N	Jumber				
Term:			Academic	Advisor's Na	me:					
The probation and suspension rules are outlined in the Undergraduate Bulletin at: https://registrar.appstate.edu/resources/course-catalogs/undergraduate-bulletin										
I request an appeal of the Appalachian State University Probation/Suspension Policy based on the following reason(s). I have attached supporting documentation to this request and included my plan for improving my academic performance. I understand that petitions must include supporting documentation and a plan for improvement in order to be considered. 4000 Character Limit										
L										
Signa	ature					Date				

Please return completed and signed form and supporting documents to: Appalachian State University, Office of the Registrar Fax: 828-262-3136 email: registrar@appstate.edu