NDSU

NORTH DAKOTA STATE UNIVERSITY

Appeal for Exception to Academic Suspension

Appeal Information and Directions: NDSU will uphold all scholastic standards approved by the University Senate. Academic information and regulations may be viewed online at www.ndsu.edu/bulletin/academics.

Rationale for an Appeal: Students who wish to appeal an NDSU academic suspension due to extenuating circumstances must submit this form to the Office of Registration and Records. Extenuating circumstances may include, but are not limited to, a serious or extended illness, or a personal crisis.

Procedure: The Office of Registration and Records acts as the University clearinghouse for academic appeals and will: **a)** accept and record the appeal for record keeping purposes; **b)** forward the appeal to the Chair of the Student Progress Committee (SPC) in the college of your chosen major; **c)** record the decision made by the SPC; and **d)** notify the student in writing of the decision rendered. If you are undecided and have not selected a major, your appeal will be reviewed by the SPC in the College of University Studies. ***Submit the appeal form to the Office of Registration and Records, 110 Ceres Hall, Fax Number: 701-231-8959***. ***This academic appeal form is NOT associated with the financial aid suspension appeal. If you have been placed on financial aid suspension, you have the right to appeal and may do so through the Office of Student Financial Services, 202 Ceres Hall.***

Consider the Appeal Carefully: Students should consider their appeal carefully and complete all sections of the appeal form. A typed format is recommended so that your request may be easily read. Students submit their request on the appeal form but do not appear before the committee. ***Decisions of the SPC are final and are made with the authority of the Provost/Vice President of Academic Affairs and the University Academic Standards committee***.

Documentation: Supporting information documenting illness or other special circumstances MUST be solicited by the student from appropriate sources. A student is required to contact their academic advisor and create a plan for academic success. This plan is to accompany the appeal form.

Directions: Complete the student information and initial the statements in the STUDENT section to indicate you have read and understand what is necessary for suspension revocation consideration. ***Please be aware that incomplete or missing information will result in the appeal being dismissed.*** Every attempt is made for a timely decision so that academic planning may occur. However, there are instances during times of peak activity (beginning/end of semester) and observed breaks and holidays when it may take longer for the committee to render a decision.

Student Information

Today's Date: _____ **Program/Major:** _____

Student Name: _____ **Student ID #:** W _____
Last Name First Name MI

Current Address: Street Address _____ Apt # _____

City _____ State _____ Zip _____

Phone #: _____ **NDSU E-Mail:** _____

Are you receiving Veterans Affairs Education benefits? ◯ Yes ◯ No

STUDENT

Initial each statement to indicate that you have read and understand the appeal criteria. Include the necessary information and/or documents for the Student Progress Committee to make an informed suspension revocation decision.

1. _____ I have extenuating circumstances which interfered with my academic progress. These circumstances are documented and attached for review. If you do not have documented extenuating circumstances, please initial here: _____

2. _____ I have included an explanation which addresses my past academic performance which either contributed or led to this suspension. As part of the explanation, I have detailed what I plan to change of do differently so that I may be successful in achieving good academic standing. The explanation is typed or written legibly on an attached 8½" x 11" sheet of paper.

3. _____ I have consulted with my academic advisor or other qualified NDSU academic official in creating this plan and he/she has signed below and stamped the document using their department stamp.

4. _____ I understand that if this appeal is not successful I will be required to serve my academic suspension period and will not be eligible to ***Petition for Readmission*** for two grading periods (includes summer). I further understand that I am not allowed to transfer credits that have been earned during this suspension period back to NDSU from other institutions unless prior approval has been granted through the ***Appeal for Exception to Academic Regulations*** process.

5. _____ I understand that if this appeal is approved, I have one semester to bring my cumulative grade point average to academic good standing.

Student Signature: _____ Date: _____

ADVISOR *(required to be considered)*

[Department Stamp]

Advisor Signature: _____ Date: _____