

**UNIVERSITY ACADEMIC APPEALS COMMITTEE
APPEALS PETITION**



All students must maintain a 2.0 overall GPA to be in good standing and are given one probation semester after their overall GPA drops below 2.0 at the end of fall or spring semesters. If the overall GPA does not reach a 2.0 in that probation semester or if the semester GPA is below 2.5, students are suspended. A student who was placed on suspension must earn a minimum 2.00 GPA the first semester back and raise the cumulative GPA to at least 2.00 by the end of the second semester back or earn a 2.50 GPA for every semester following the suspension until the cumulative GPA is 2.00 or greater.

Any appeal for exceptions to the policy must be based on very unusual circumstances. If you believe there were, indeed, circumstances beyond your control which contributed to your problem, use this form as part of your written appeal to the University Academic Appeals Committee. This form and all documentation must be submitted through your Associate Dean of Undergraduate Programs to the Appeals Committee. You have the right to appear in person before the Appeals Committee, however, it is generally not necessary and may not be in your best interest. You are encouraged to discuss this option with your academic advisor. All matters related to your appeal will be handled in a confidential manner.

IMPORTANT NOTE: If you are appealing your suspension based on physical, psychiatric, or disability/ learning disability reasons, your appeal must first be reviewed by the Health Evaluating Committee. A recommendation letter from the appropriate office is required to complete this appeal petition.

- * Physical issue: Phyllis Smith (smithpj@vt.edu or 540-231-5313), Schiffert Medical Center
- * Psychiatric issue: Chris Flynn (flynnc@vt.edu, 540-231-6557), Cook Counseling Center
- * Disabilities, including learning disabilities such as ADD or ADHD: Services for Students with Disabilities (SSD), (ssd@vt.edu or 540-231-0858), Kent Square, 250 S. Main Street, Suite 300

Student Name: _____
Last First MI

ID #: _____ Level (Fr So Jr Sr): _____

Term and year you last attended: _____ Anticipated Graduation Date: _____

College: _____ Current Major: _____ Anticipated Major, if any: _____

Address for decision letter: _____

Phone Number: _____ Email: _____

Term and year for which you are appealing to enroll: _____

COMPLETE THE FOLLOWING STEPS

1. Attach to this form a typed statement explaining your basis for appeal; maximum length of two pages. Address the following questions:

What extraordinary circumstances beyond your control contributed to your academic performance falling below minimum university eligibility standards?

Why should you be given special consideration?

Explain how the circumstances that you cited as causing your academic difficulties will have changed to allow success if your appeal is granted.

Be sure you have covered all information relevant to your appeal.

2. If your appeal is based upon physical, psychiatric, or disability/learning disability reasons, attach a letter of recommendation from the appropriate office, as noted on page one: Schiffert, Cook, or SSD.
3. Optional: Attach a letter from your academic advisor expressing his/her opinion on the academic appeal.
4. Do you have an interest in appearing in-person at the Appeals Committee meeting? ___ yes ___ no
5. In the columns below indicate the courses which you plan to take in the next term of enrollment should your appeal be granted and show, by your own calculation, what grades are needed in these courses to reach the GPA needed for eligibility?

Department	Course Number	Credits	Target Grade	Quality Credits

Total Credits _____ Total Quality Credits _____

Anticipated Semester GPA _____

Anticipated Overall GPA at end of term _____

6. Sign to acknowledge the following statement:

I understand that making misleading statements, misrepresenting facts or circumstances, or presenting false documentation in this petition or in the attached material, constitutes a serious violation of the university Honor Code.

Student's Signature

Date

7. Submit this completed form and attachments to the Associate Dean for your college, by the deadline established by the college.

College	Name	Email	Telephone	Office Location
Ag & Life Sciences	Dr. Susan Sumner	sumners@vt.edu	540.231.5290	1070 Litton Reaves
Arch & Urban Studies	Dr. John Browder	browder@vt.edu	540.231.6415	202 Cowgill Hall
Business	Dr. Candice Clemenz	clemenz@vt.edu	540.231.6602	1046 Pamplin Hall
Engineering	Dr. Bevelee Watford	enr-aa@vt.edu	540.231.3244	212 Hancock Hall
Lib Arts & Human Science	Dr. Rachel Holloway	rhollowa@vt.edu	540.231.6770	238 Wallace Hall
Natural Resources	Dr. Dean Stauffer	dstauffe@vt.edu	540.231.5297	138 Cheatham Hall
Science	Dr. Jill Sible	siblej@vt.edu	540.231.5145	103 Science Adm Bldg
University Studies	Ms. Kimberly Brown	ksbrown@vt.edu	540.231.8440	117 Femoyer Hall

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Based on _____ hours of enrollment, the student would need a _____ term GPA to reach a 2.0 overall.