

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 (extenuating) circumstances. If you believe there were, indeed, circumstances beyond your control which contributed to your challenges, 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. 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. You must complete the necessary paperwork and bring the form to your Academic Associate Dean's Office for a signature. You then turn in the form to one of the offices listed below.

- *Physical issue:* Phyllis Smith (smithpj@vt.edu or 540-231-5313), Schiffert Medical Center (form located online)
- *Psychiatric issue:* Cook Counseling Center, 540-231-6557, (form located online)
- *Disabilities, including learning disabilities such as ADD or ADHD:* Services for Students with Disabilities (SSD), (ssd@vt.edu or 540-231-3788), Lavery Hall, Suite 310; 430 Old Turner Street (form located in office)
- *Personal/Other:* Dean of Students, 109 New Hall West, 109 West Campus Drive; dean.students@vt.edu

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

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

College: _____ Current Major: _____

Anticipated Major Change, if any: _____

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. A strong academic appeal covers all the information relevant to your situation. Be sure to address the following questions.
 - a. Please provide a clear and detailed explanation of the extenuating circumstances that were beyond your control, including how those extenuating circumstances contributed to your academic performance falling below the minimum university eligibility standards of maintaining a cumulative grade point average (GPA) of 2.0.
 - b. Please provide details on how you have overcome those extenuating circumstances.
 - c. Please provide a detailed plan on how you will work to enhance your academic performance (e.g., regular meetings with an academic advisor or coach or enrolling in a student success course).

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2. In the columns below indicate the courses which you plan to take in the next term of enrollment should your appeal be granted. Show, by your own calculation, what grades you expect to achieve in these courses.

	Subject	Course Number	Credit Hours	Target Grade	*Quality Points
Example	HNFE	1004	3	B	9
TOTAL					

*Quality points are calculated by multiplying the credit hours for a course by the number of GPA points that your grade for the course warrants. <https://www.undergradcatalog.registrar.vt.edu/0910/acapolicies/grades.html#Anchor-Grades-17761>

Anticipated Semester GPA _____ (total quality points divided by total credit hours)

3. 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

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
CALS	Susan Sumner	calsap@vt.edu	540.231.5290	1060 Litton-Reaves
AAD	Susanna Rinehart	susannar@vt.edu	540.231.0795	202 Cowgill Hall
COB	Michelle Seref	mmhseref@vt.edu	540.231.6602	1046 Pamplin Hall
COE	Keith Thompson	tkeith72@vt.edu	540.231.3244	212 Hancock Hall
CLAHS	Monica Kimbrell	mkimbrell@vt.edu	540.231.6770	102 CLAHS Building
CNRE	Keith Goyne	goynek@vt.edu	540.231.7463	138 Cheatham Hall
COS	Michel Pleimling	pleim@vt.edu	540.231.9805	North End Center, Suite 4300
US	Lauren Thomas	lmadaras@vt.edu	540.231.8440	Gilbert Place, Office 2115
VET MED	Ela Austin	elaaustin@vt.edu	540.231.3532	205 Duck Pond Drive