

# UNIVERSITY STUDIES ACADEMIC APPEALS PETITION

**Directions:** All appeals for exception to the Academic Eligibility Policy, as outlined in the Virginia Polytechnic Institute and State University Catalog, **must be based on extenuating circumstances that have contributed to a student's inability to meet the university's minimum academic standards.** After consulting with your academic advisor, please complete the five sections of this petition and return to:

Kimberly Brown, Director  
University Academic Advising Center / University Studies  
117 Femoyer Hall (Mail Code 0154)  
Blacksburg, VA 24061  
(540) 231-8440

**Note:** If your extenuating circumstances are based on **medical/psychiatric issues**, do not complete this form. Instead, contact the following department:

Schiffert Health Center  
McComas Hall  
(540) 231-5313

Please note: all medical records that you submit in support of your appeal will become a part of your permanent record at Virginia Tech.

## SECTION I. Student Information

Student Name: \_\_\_\_\_

Where you can be contacted to receive the Appeals Committee's decision:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Student Number: \_\_\_\_\_ College: University Academic Advising Center

Date of entry: \_\_\_\_\_ Date of last attendance: \_\_\_\_\_  
Fall, Spring, Summer I, Summer II Year Fall, Spring, Summer I, Summer II Year

Date for which you are appealing to enroll: \_\_\_\_\_  
Fall, Spring, Summer I, Summer II Year

## SECTION II. Letter of Explanation

Please attach to this form a typed letter explaining your basis for appeal. The letter should be addressed to the University Academic Appeals Committee and should address the following questions:

1. What extraordinary or "unusual" circumstances contributed to your academic performance falling below minimum university eligibility standards? Attach supporting documentation.
2. Why should you be given special consideration?
3. Explain how the circumstances, which you cited as causing your academic difficulties, will have changed to allow success if your appeal is granted.

Note: Appeals that are not based on extenuating circumstances will not be considered.

**SECTION III. Tentative Schedule**

In the columns below, indicate the courses which you plan to take in the next semester 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. For assistance in calculating your GPA, refer to the GPA calculator on Hokie Spa.

Department	Course #	Credits	Target Grade	Grade Points
i.e. Math	i.e. 1015	i.e. 3	i.e. B	i.e. 9.0

Total Credits \_\_\_\_\_

Total Grade Points \_\_\_\_\_

Semester GPA \_\_\_\_\_

Overall GPA \_\_\_\_\_

**SECTION IV. Right to Appear**

Students have the right to appear in person before the Academic Appeals Committee. However, it is not always advisable that students appear in person, as it may not be in your best interest. Please discuss this matter with your advisor.

I would like to appear in person

I would not like to appear in person

**SECTION V. Signatures**

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

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I have met with the above student to discuss the implications of this academic appeal petition.

\_\_\_\_\_  
Associate Director Signature

\_\_\_\_\_  
Date

*Note: You will receive written notification of the outcome of this academic appeal within a week of the decision.*