## EARLY READMISSION APPEAL TO ONE-YEAR ACADEMIC SUSPENSION FA ACADEMIC AFFAIRS COMMITTEE

St. Cloud State University

Name	SCSU ID		
Phone ()	HuskyNet email		@stcloudstate.edu
Alternate email address (if HuskyNet not acti	ivated)		
Address	_ City	State	Zip
Would you like this information shared with	the Financial Aid Office?	YesNo	
Students who are suspended for one year m then submit a written appeal for early readı	•	a minimum of one	e semester and may
<ul> <li>The required information for your appeal is I</li> <li>This form signed and dated.</li> <li>A letter from you to the FA Academic Aff should receive favorable consideration.</li> <li>If there were extenuating or significant consuspension, additional documentation (condor support letters (medical provider)</li> <li>Your signed academic success plan. Form A letter of support for your appeal from member of a SCSU student support service International Studies, Counseling and Psymay be emails, but should include contact Appeals must be submitted by the Monday Semester and the first Monday of August. Semester and the first</li></ul>	fairs Committee clearly excircumstances that contribe court records, hospitalizate, lawyer, mental health pens are available in the Accione of the following: acaice such as Multicultural Sychological Services, or State information for the letter two weeks before the lass submit your appeal includer onically to aap@stcloud.	couted to your probation, military, medic rofessional, judge, ademic Appeals & Fademic or major advitudent Services, that tudent Disability Setter writer including st day of classes Fading the above infostate.edu, fax (320 state University, 72	ation and cal, death, etc.) etc.) are required. Probation Office. visor, SCSU faculty, and Center for ervices, etc. These telephone numbers. all and Spring ormation to the 0-308-5672), or mail
Initial these statements to indicate that you			
I understand that if this appeal i suspension in full.  I understand that the decisions a final.  If my appeal is successful, I must committee's recommendations.	and recommendations of	the FA Academic A	Affairs Committee are
Signature		 Date	

Please contact the Academic Appeals & Probation Office, Centennial Hall 210, with any questions by phone (320-308-4913) or email — <a href="mailto:aap@stcloudstate.edu">aap@stcloudstate.edu</a>.

## ACADEMIC SUCCESS PLAN TEMPLATE

Student Name	SCSU ID
Current Cumulative GPA Current Cumulative Credit Completion Rate (CCR)	%
(This information is on the suspension email you received.)	
Identify those obstacles (listed below) that prevented y and document issues for every semester that led to this	• • • • • • • • • • • • • • • • • • • •
<ul><li>Poor attendance</li><li>Study skills</li></ul>	<ul> <li>Test-taking difficulties</li> <li>Time management</li> <li>Personal Issues</li> </ul> vious life circumstances
Please answer the following questions on a separate shall signature of your advisor, a faculty member, or other usuccess plan.  1. How do the obstacles you selected above interfere volume 2. What are your solutions to overcoming these obstacles	vith your ability to succeed academically at SCSU?
<ol> <li>Explain how you will work with an advisor, faculty m academic goals? How many times a month/semeste specific dates.</li> <li>Identify those offices and resources at SCSU that you will</li> </ol>	r will you meet to discuss your progress? Include
<ul> <li>Academic Learning Center (CH 236)</li> <li>Business Advising (CH 229)</li> <li>Major Advisor</li> <li>Multicultural Academic Support Center (CH 221)</li> <li>Women's Center (WC)</li> <li>The Write Place (51B 117)</li> <li>Tutoring</li> <li>Other</li> </ul>	<ul> <li>Advising Center (CH 366)</li> <li>Counseling and Psychological Services (SH 103)</li> <li>Math Skills Center (CH 224)</li> </ul>
The following questions are to be completed during yo	
What semester/term GPA do you intend to earn? What semester/term credit completion rate (CCR) do you in	
What cumulative GPA do you intend to earn by the end of t What cumulative credit completion rate (CCR) do you inten	
What is the <b>maximum</b> number of credits you will enroll in?	Credits
Student Signature	Faculty/Staff Member Signature / Date
Date	Printed SCSU Faculty/Staff Member Name SCSU