

# EAST TENNESSEE STATE UNIVERSITY SCHOOL OF GRADUATE STUDIES

Office Use Only Changed on Banner: Date: _____ Initials: _____
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## Application for Change from Conditional Admission to Unconditional Admission

TO: Associate Dean, School of Graduate Studies

FROM: \_\_\_\_\_  
Student's Name (please type or print)
Student ID

DATE: \_\_\_\_\_ Student's Email \_\_\_\_\_

I was admitted conditionally to \_\_\_\_\_ for the \_\_\_\_\_, \_\_\_\_\_.  
Program
Semester
Year

Having met the following conditions, I now request that my conditional status be changed to unconditional:

Course Number	Course Title	Grade	Credit Hours	Semester Completed	Office Use Only

### Other Conditions

GPA:	Proof of Degree:
GMAT:	PPST:
GRE:	Other:
Letter of Recommendation:	Other:

\_\_\_\_\_  
Student's Signature Date

\_\_\_\_\_  
Graduate Coordinator Date

\_\_\_\_\_  
Associate Dean, School of Graduate Studies Date