PETITION FOR AN APPEAL OF ACADEMIC STATUS
EAST TENNESSEE STATE UNIVERSITY

Appeal for Re-Admission following Academic Suspension - where extenuating circumstances are established as primary factors relating to low grades, a student may petition to waive the period of suspension. This petition must describe the verifiable extenuating circumstances which may include: illness as evidenced by medical documentation; personal problems, such as divorce or serious domestic problems; accidental injury; or other circumstances beyond the student’s control.

Upon receipt of the written petition and any supporting documents, a preliminary decision will be made whether there are satisfactory extenuating circumstances to warrant a formal appeal hearing. If granted, the student will be notified of the time and place of the appeal hearing.

Student’s Complete Name ___________________________________________ Student ID # __________________________
Major _______________________________ Are you presently listed in this major with the Registrar’s Office? __________
Home Phone Number __________________ Work Phone Number ___________________________
Term Appealing for Reentry: ________________ Have you ever filed an appeal for academic suspension before? ___ yes ___ no

If you were not enrolled the previous semester, have you applied for readmission with the Office of Admissions? _____ yes _____ no
Have you attended any other higher education institution since your last term at ETSU? _____ yes _____ no
A copy of transcripts for all transfer work subsequent to suspension from ETSU must be provided before the petition will be reviewed.

Student’s explanation of extenuating circumstances (be specific): ___________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
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(Please use other side if necessary)

_________________________________________________________________________________________

Student’s Signature
_________________________________________________________________________________________

PLEASE RETURN PETITION TO: Student Life and Enrollment Office, Burgin Dossett Hall, Suite 302/303
OR MAIL TO: East Tennessee State University, Student Life and Enrollment, PO BOX 70725, Johnson City,
TN 37614-1710

FOR STUDENT AFFAIRS OFFICE USE ONLY:

Academic Transcript Included: Yes _______ No _______
Additional Documentation Included: Yes_______ No_______
Comments:________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
Petition for Appeal:  Accepted _____ Declined_______
Signature of Reviewing Person ______________________________________ Date Reviewed ____________