

**GRADUATE STUDENT ACADEMIC DISMISSAL APPEAL  
NOTICE OF APPEAL DECISION**

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Program: \_\_\_\_\_ Date: \_\_\_\_\_

**The Graduate Academic Appeal Committee will uphold the dismissal.**

**The student may reapply for admission into the program in \_\_\_\_\_**

**The Graduate Academic Appeal Committee will overturn the dismissal. The student will be returned to active status.**

**Please specify reasons for this decision:**

**GAAC Signatures**

\_\_\_\_\_  
GAAC Signature

\_\_\_\_\_  
GAAC Signature

\_\_\_\_\_  
GAAC Signature

Completed form will be routed to the Registrar with copy to the Office of Graduate Studies and Adult Learning.