

## **GRADUATE DISMISSAL APPEAL FORM**

Request to appeal a graduate dismissal

**Instructions:** Submit this form to the Program Coordinator within 5 days of receiving the dismissal notice.

- 1. The appeal must present the circumstances that contributed to your lack of academic success. Explain how it impacted your performance and how the issue(s) have been removed or resolved.
- 2. List the steps you will take to sufficiently improve your academic performance if reinstated.
- 3. Include any additional information and/or documentation you want considered in the review of the appeal.

Any appeal submitted without following the procedure outline on this form will be automatically denied. The decision will be sent to the email listed according to the time frame detailed below:

Applicants dismissed from a graduate program due to academic performance may appeal the decision within five days of receiving the dismissal email. The appeal shall be submitted in writing to the Dean of Graduate Studies. The Dean shall have 10 work days to respond to the appeal. If the applicant is not satisfied with the decision, he or she may appeal in writing to the Provost and Vice President of Academic Affairs. The Provost shall respond in writing within 10 work days. The decision of the Provost and Vice President for Academic Affairs is final.

After one semester, a student who has been dismissed may reapply for admission and must present evidence of reasonable expectation to succeed in graduate study. A student dismissed a second time may reapply after one full academic year. No student may reapply after three dismissals for academic deficiencies. Please contact the Graduate Studies Office for instructions on how to reapply.

**Section A:** To be completed by the student.

Name:	Student ID:		
Email:	Phone Number: GPA:		
Graduate Program:			
Dismissal Semester and Year: _	Course(s) failed:		
Section B: Appeal letter may be type	d below or attached to this form.		
Section C: Signatures.			
Section G. Signatures.			
Print Name of Student	Signature of Student	Date	<del></del>
Print Name of Program Head	Signature of Program Head	Date	Support Y/N
Print Name of College Doon	Signature of College Dean	——————————————————————————————————————	Support V/N

Program Head Comments:			
Submit admissions appeal to: Graduate Studies			
MB 1208 4901 East University Odessa, TX, 79762			
4901 East University Odessa, 1X, 79762			
Phone: 432-552-2530			
Fax: 432-552-3530 Email: gradstudies@utpb.edu			
Section D: Decision of Dean of Graduate Studies. To be completed by the Graduate Studies Office.			
Appeal Status: Approved Denied			
Graduate Studies Comments:			
Graduate Studies Comments:			
Printed Name of Graduate Studies Dean Signature of Graduate Studies Dean Date			
Student Requested Appeal to Provost/VP Academic Affairs			
Section E: Decision of Provost and Vice President of Academic Affairs			
Section E: Decision of Provost and Vice President of Academic Affairs			
Appeal Status:			
Printed Name of Provost & VP of AA Signature of Provost & VP of AA Date			