



Petition to Appeal Academic Suspension

Undergraduate Advising and Research (UAR), Vice Provost for Undergraduate Education (VPUE)

Sweet Hall, 1st Floor, Stanford University, Stanford, CA 94305-3085

(650) 723-2426, (650) 725-1436 (fax), advising@stanford.edu, <http://undergrad.stanford.edu>

Purpose:

A *Petition to Appeal Academic Suspension* must be submitted by a student wishing to appeal an Academic Suspension due to compelling and extenuating circumstances. A student working with the Office of Accessible Education (OAE) may also need a signature and documentation from that office.

Petition Deadline:

As stated in Suspension Letter.

Instructions:

Please note that appeals must demonstrate exceptional circumstances; otherwise, they are generally denied.

- Make an in-person or phone appointment to meet with a UAR Advisor (Academic Advisor in Sweet Hall, Academic Director in your residence or Academic Advisor located in the Athletic Academic Resource Center) to determine whether your request is appropriate.
- Write a Personal Statement (approx. 1-2 pages) describing time spent at Stanford; address, where appropriate:
 - Plans upon entering Stanford;
 - Behaviors that were successful and behaviors that were unsuccessful;
 - Any factors/events that prevented you from completing minimum requirements;
 - Changes made which will translate to academic/personal success upon your return;
 - Resources at Stanford to be used upon return to ensure your success;
 - Detailed immediate and longer-term academic plans upon your return;
 - Plans for completing any missing/unreported (e.g., I, *, L, and N) grades.
- Meet with the UAR Advisor to discuss your appeal and written statement.
- References to correspondence with others (e.g. e-mails, etc) must be included as documentation, or corroborated by individual(s) referenced.
- Obtain appropriate signatures and submit form, Personal Statement and supporting documentation (e.g. e-mails, etc) to your UAR Advisor or to the UAR Front Desk in Sweet Hall, 1st Floor.

Notification:

You will receive written notification of the results of your petition once it has been reviewed. Notification will be sent to the address and/or email address entered on this form. Failure to complete any, or part, of the requested information will delay the review of your request. Petitions without all required signatures will not be reviewed. Petitions submitted after the deadline may not be reviewed and/or may result in no change to your Academic Standing status.



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Please complete the information below in print or type. Read carefully the instructions on the reverse of this sheet. Submit completed form and all supporting statements/documentation to your UAR Advisor or to the UAR Front Desk in Sweet Hall, 1st Floor.

1

Student Info

Name (Last) (First) (Middle) Stanford ID Number

Fr So Jr Sr CoTerm Yes No

Classification International? Graduation Qtr/Year Major/2nd Major (if applicable)

Name of on-campus residence Academic/Departmental/Major Advisor(s)

Mailing Address City State Zip

Phone Number Email Address

Residence Dean with whom you have worked (if applicable) UAR Advisor with whom you have worked

By signing below, I certify that the information contained on this application and all supporting documentation is true and accurate. I understand that misrepresentation(s) of fact and/or circumstance(s) may give rise to a complaint being filed with the Office of Judicial Affairs for investigation as possible violation(s) of the Fundamental Standard.

Student Signature (required) Print Name Date

2

Action

Quarter: Autumn Winter Spring Academic Year (e.g. 2008 - 2009)

3

Advisors

UAR Advisor Signature (required) Print Name Date

OAE Advisor Signature (as recommended) Print Name Date

Other Signature (as recommended) Print Name Date

NOTE: The UAR Advisor signature indicates that the advisor has reviewed the petition process and discussed your situation with you. The signature does not, necessarily, indicate an endorsement of your request. Advisors may send additional comments to UAR at the address above.

VPUE Only

Log _____ Decision: ___Approved ___Denied ___ASRB Date _____ Init. _____ Date _____

Comments:

Record _____ Notify _____ STF _____