Northeastern University

College of Arts, Media and Design

ACADEMIC DISMISSAL APPEAL FORM

DIRECTIONS — Students complete Sections A, B, and C. Section D may be used if additional space is needed. Form must be typed. Submit this appeal form with any supporting documentation, to the Academic Standing Committee via the Centers' email, camdadvising@neu.edu.

Required Documentation (Please send completed appeal form to: camdadvising@neu.edu)
Students dismissed from the College of Arts, Media and Design:

- One letter of support from a Faculty member in your discipline.
- If applicable, one letter of support from a medical professional.

Students dismissed from colleges other than CAMD

- One letter of support from an administrative or faculty member of your prior college.
- One letter of support from a faculty member in your intended discipline.
- If applicable, one letter of support from a medical professional.

Note: Please direct all questions pertaining to the appeal form to your CAMD Academic Advisor. http://www.neu.edu/camd/aace

SECTION A: STUDENT INFORMATION

Student Name (Last, First, M	I)		Student ID #: 00-		Date:			
Local Address:		City:		State);	Zip Code:		
Northeastern Email: @husky.neu.edu	Daytime Phone #:		Current or Ii Major:	Current or Intended Major:		isor:		
For Committee Use Only ACADEMIC STANDING COMMITTEE ACTION:								
Granted Denied	Date:	:						

SECTION B: EXPLANATION OF CIRCUMSTANCES

Student Name (Last, First, MI):	Student ID #:	Date:			
Please give careful thought to the preparation Committee will have as complete a picture of y	of your statements on this app our situation as you can prese	peal form so that the ent.			
Please list the factors that contributed to your poor performance.					

SECTION C: PLAN TO IMPROVE ACADEMIC PERFORMANCE

Student Name (Last, First, MI):	Student ID #:	Date:				
If reinstated, here is a detailed plan to improve my academic performance. Please provide evidence including verification that you have contacted the appropriate individuals.						

SECTION D: ADDITIONAL INFORMATION TO SUPPORT YOUR APPEAL

Student Name (Last, First, MI):	Student ID #:	Date:
State It wille (East, 1 list, 111).	Student ID ".	Date.