

UNIVERSITY

CONDITIONAL STUDENT APPEAL FOR UNDERGRADUATE ENROLLMENT

Name: _____

Student I.D. _____

Last term/semester enrolled at TROY _____ Last Campus Attended: _____ Cumulative GPA: _____

Committee Decision: (indicate one of the following decisions):

READMIT _____
Semester/Term _____ Date _____

TRANSFER _____
Semester/Term _____ Date _____

APPEAL DENIED _____
Semester/Term _____ Date _____

PLAN FOR IMPROVEMENT

The following conditions must be met to continue enrollment in Troy University.

Student Signature

Committee Member's Signature

Date

Date