



Office of the Registrar
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ACADEMIC FORGIVENESS REQUEST

Student Information:

Student Name _____
Last First Middle

Student ID _____ Current Date _____
(R00.....)

Dates of attendance in a higher education institution:

From _____ To _____

From _____ To _____

From _____ To _____

From _____ To _____

_____ I have met with an appropriate Administrative Officer, have reviewed the Academic Forgiveness Policy, and have discussed my academic history and the implications of requesting exemption of F/FIW and D grades from my previous history.

Please select the following choice:

_____ Please forgive all 'F', 'FIW' and 'D' grades earned before the time period listed above that do not meet the intent of the D/F repeat rule to be exempted from my GPA calculation for graduation purposes only. The 'D' grades forgiven cannot be used for credit toward graduation.

_____ Please forgive only 'F' and 'FIW' grades earned before the time period listed above that do not meet the intent of the D/F repeat rule to be exempted from my GPA calculation for graduation purposes only. The 'D' grades previously earned will be used for credit toward graduation & GPA calculation.

Student Signature _____ Date _____

Office of the Registrar:

Received Date: _____

Eligible for Forgiveness?

_____ 12 Hours with at least a 2.0 GPA

_____ At least four consecutive years of inactivity

_____ Current Student

Completed By (Signature): _____

Date Forgiveness Granted: _____