

## Request for GPA Adjustment Following Return from Separation or Dismissal G6

## The Graduate School

Student's Name:		UIN#:		
College:	ge: Deg		gree and Program:	
The student listed above has been newly dismissal of eight or more consecutive ye removed from the calculation of the GPA the student's GPA and graduation require	ears and meets the in the new degre	e criteria to have all prev	ious course grades	and credits
Course Name and Number	Course Name and Number			
Graduate Program Director (Print)	Graduate Program Director (Sign)		Date	
Department Chair (Print)	Department Chair (Sign)		Date	
College Dean or Designee (Print)	ignee (Print) College Dean or De		Date	
Vice Provost & Dean The Graduate School (Print)	Vice Provost & Dear	The Graduate School (Sign)	Date	,