

Southern Union State Community College

Academic Suspension Appeals Application

Date _____

Applicant's Name _____ Student Number _____

I am currently on suspension with Southern Union State Community College for one year (three semesters) beginning _____ (semester) _____ (year). I have currently served _____ semester/s of my suspension.
(1 or 2)

I am fully aware that the Admissions Committee at Southern Union State Community College, based upon my appeal, can allow me to re-enroll as a student prior to serving my full suspension. However, the credits I earn at Southern Union may or may not be accepted for transfer credit to previous or future institutions. It is at the discretion of the receiving institution(s) to determine transfer credits.

Print Name

Signature

Address

Phone Number

City, State Zip

Email Address

Please attach a detailed letter of appeal*, supporting documentation, and an unofficial copy of your transcript to this form.

*The letter of appeal should include a detailed explanation of the circumstances leading to your suspension, how the circumstances have changed, and why you believe you are now prepared to be successful in school. Any other information, including relevant and verifiable supporting documentation, that would be helpful to the committee in making a decision about your request to enroll prior to serving your full suspension should also be attached.