



Name \_\_\_\_\_

UT EID \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Semester You Would Like to Return  Fall  Spring  Summer

Year You Would Like to Return \_\_\_\_\_

**INSTRUCTIONS**

Note: Students should use this form when they have sat out the entirety of their second scholastic dismissal or when they have sat out at least two long semesters and raised their GPA to a 2.0. If the appeal is approved, the dismissal will remain on record; students will return to the university on scholastic probation regardless of current GPA.

**For students appealing to return after sitting out the entirety of their dismissal:**

- Attach a statement explaining what factors contributed to your academic situation leading up to the second dismissal and how you have resolved those issues.
- Describe what you have been doing since you last attended the university, why you want to return, what your intended major is, and how/when you plan to complete your degree.

**For students appealing to return after sitting out at least two long semesters and have raised their GPA to a 2.0:**

- Attach a statement explaining you successfully raised your GPA and how you intend to maintain/improve your GPA.

**For all students:**

- Submit this appeal form, your written statement, and any supporting documentation to the Student Division by one of the following:
  - In person: Gebauer (GEB) 2.200.
  - Fax: 512.471.5393 (Attn: Records). Call 512.471.4271 to confirm your fax has been received.
  - Email: asklibby@austin.utexas.edu. A confirmation email will be sent when your request has been received.
- You will be notified of the decision online via Secure Academic Note (SAN). Please allow at least two weeks for processing.
- If your appeal is approved, you must still be readmitted to the university. The application, deadline, and other terms for readmission can be found on [bealonghorn.utexas.edu/former](http://bealonghorn.utexas.edu/former).

**CONDITIONS**

Check the boxes to indicate you understand and agree to the terms.

- I understand that approval of this appeal will not remove the dismissal from my record.
- I understand that I will return to the university on scholastic probation, regardless of my GPA, and will subject to a third and final dismissal if I do not meet the terms of my SUCCESS Agreement.

By signing below, I affirm that all statements and documents I submit in support of my appeal are true and correct.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Appeal Decision \_\_\_\_\_

Advisor's Initials \_\_\_\_\_

Dean's Signature \_\_\_\_\_

Date \_\_\_\_\_

Dismissal Number \_\_\_\_\_

Semester Eligible to Return \_\_\_\_\_