



ACADEMIC PETITION

(RO-02/24)

Registrar's Office • 200 High Street • Glenville, WV 26351 • 304-462-4117 • FAX 304-462-8619 • registrar@glenville.edu

DO NOT use this form if you are appealing a grade. You must use the Grade Appeal Form.

Student's Name: _____ GSU ID #: _____

Permanent Address: _____

Local Address: _____

Phone #: Cell Home _____

Explain what you are petitioning below. You may include supporting documentation or attach additional pages of explanation if needed. _____

Student Signature: _____ **Date:** _____

Support Do not support **Advisor Signature:** _____ **Date:** _____

Additional information if needed: _____

Academic Appeals Committee Recommendation (if applicable): _____

Agree Disagree **Provost Signature:** _____ **Date:** _____

Comments: _____
