PART I. To be completed by the Student:

Name: ____________________________

Last or Family Name: Snell

First or Given Name: Sydney

Middle Name: ____________________________

NU ID: 001234567

Current Program/Concentration: MS Engineering

E-Mail: Snell.s@northeastern.edu

Today’s Date: ____________________________

Degree Level: ☑ MS ☐ BSMS ☐ PhD

First Term on Probation: ☑ Fall ☐ Spring ☐ Summer 2021

Next Term of Registration: ☑ Fall ☐ Spring ☑ Summer 2021

Courses with Grades below B: __________________________________________

Current Course Registrations for Next Term: __________________________________________

Describe the reasons for your low cumulative GPA: __________________________________________

In this section, students should describe what led them to earning a low GPA in their graduate program. Students can attach a separate document, if needed.

How do you plan on improving your grades in the future? __________________________________________

In this section, students should describe how they will improve their GPA. For example, reaching out to the course instructor or the TA or utilizing the university resources. Students can attach a separate document, if needed.

__________________________

Student Signature

__________________________

Today’s Date

__________________________

Date Signed

☐ Transcript Attached
PART II. To be completed by the Graduate School of Engineering:

Student’s next term is:  □ Fall  □ Spring  □ Summer  2021

Term GPA needed to achieve cumulative 3.000 GPA: ___________________

Current Cum. GPA (including ENCP): ____________  SH completed (including ENCP): ____________

Current Cum. GPA (excluding ENCP): ____________  SH completed (excluding ENCP): ____________

GSE Recommendations:  (For Office Use Only)

(To be completed by the Graduate School Academic Advisor)

_Graduate School Review

Name  Signature  Date Signed

Title:

Email:

PART III. To be completed by the Program Contact:

_Academic Dismissal Appeal Decision (Completed by Review Committee):

☐ Grant appeal for an extension of one final additional academic term

☐ Uphold dismissal. Student has not met requirements for continuation in program

Comments:

_Program Contact Review

Name  Signature  Date Signed

Title:

Email:

For Office Use Only:

__________________________________

Matthew Podgurski