



# Northeastern University

## College of Social Sciences and Humanities

### ACADEMIC DISMISSAL APPEAL FORM

**DIRECTIONS** – Students complete Sections A, B, and C. Section D may be used if additional space is needed. Form must be typed. Submit this appeal form with any supporting documentation, to the Academic Standing Committee via the Office of Undergraduate Academic Advising email account, [csshadvising@neu.edu](mailto:csshadvising@neu.edu).

**Required Documentation** (Please send completed appeal form to: [csshadvising@neu.edu](mailto:csshadvising@neu.edu))  
Students dismissed from CSSH

- One letter of support from a Faculty member in your discipline.
- Additional support material if applicable.

Students dismissed from colleges other than CSSH

- One letter of support from an administrative or faculty member of your prior college.
- One letter of support from a faculty member in your intended discipline.
- Additional support material if applicable.

*Note:* Please direct all questions pertaining to the appeal form to your Academic Advisor in the Office of Undergraduate Academic Advising. [www.northeastern.edu/csshadvising/meet-our-staff/](http://www.northeastern.edu/csshadvising/meet-our-staff/)

#### SECTION A: STUDENT INFORMATION

Student Name (Last, First, MI)		Student ID #: 000-	Date:	
Local Address:		City:	State:	Zip Code:
Northeastern Email: @husky.neu.edu	Daytime Phone #:	Current/Intended Major:	Advisor:	

*For Committee Use Only*

#### ACADEMIC STANDING COMMITTEE ACTION:

Granted \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION B: EXPLANATION OF CIRCUMSTANCES**

Student Name (Last, First, MI):	Student ID #:	Date:
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*Please give careful thought to the preparation of your statements on this appeal form so that the Committee will have as complete a picture of your situation as you can present.*

Please list the factors that contributed to your poor performance.

**SECTION C: PLAN TO IMPROVE ACADEMIC PERFORMANCE**

Student Name (Last, First, MI):	Student ID #:	Date:
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If reinstated, here is a detailed plan to improve my academic performance. Please provide evidence including verification that you have contacted the appropriate individuals.

**SECTION D: ADDITIONAL INFORMATION TO SUPPORT YOUR APPEAL**

Student Name (Last, First, MI):	Student ID #:	Date:
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