 Academic Status Change Request

This form should be completed by the student requesting a change in academic status.

Once the form is completed in entirety, please submit the form to your program’s Dean’s Office.

The Dean’s Office will notify the Registrar if your request is approved.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Information** | | | | | | | | | |
|  | | | | | | | | | |
| Student Name: | | Last: | | | | | First: | | |
|  | | | | | | | | | |
| Student ID# | | 80 -  - | | | | |  | | |
|  | | | | | | | | | |
| **Current Semester** | | | | | | | | | |
|  | | | | | | | | | |
| Year | 20 | | | Fall | Spring | | | | |
|  | | | | | | | | | |
| Current GPA: | | |  | | | \*Required GPA: | |  | |
|  | | | | | | | | | |
| Current Attempted Hours: | | |  | | | \*Required Attempted Hours: | |  | |
| \*Required hours may be found on page 12 of the SUNY Canton website at: <http://www.canton.edu/student_affairs/pdf/handbook.pdf> | | | | | | | | | |
|  | | | | | | | | | |
| **Reason for Request** | | | | | | | | | |
| Addition of Winter/Summer term courses  Imputed credit courses (only applies once) | | | | | | | | | |
| **Student Signature** | | | |  | | | | **Date** | /  / |
| **APPROVAL** | | | | | | | | | |
| **Good Standing with the following academic conditions:**  None:  Conditions/Comments: | | | | | | | | | |
| **School Dean Signature** | | | |  | | | | **Date** |  |