

PETITION FOR CLEARANCE OF ACADEMIC HOLD

SECTION 1: TO BE COMPLETED BY STUDENT

If you have not been enrolled at USM for one or more semesters (fall or spring) due to your suspension hold, you must contact the Office of Admissions at 601,266,5000 for re-admission BEFORE completing this form.

					prounty and rom	• • •	
Name		Student ID Pho			ne		
Email		Enrollment Term & Year					
Current Major		Desired Major (if applicable)					
Current College Arts & TYPE OF ACADEMIC ST Once you have completed			ion Continued	:	& Human Sci. Suspension tor/school advi	Nursing & Ho	
SECTION 2: TO B Student will enroll in the follo consultation with academic a	wing courses in	the upcoming sem	nester. Any chanç				nade in
COURSE	CREDITS	COURSE		CREDITS	COURSE		CREDITS
COURSE	URSE CREDITS COU			CREDITS	COURSE		CREDITS
Student last enrolled (ter	n & year)		Student r	net previo	ous contract	yes no	N/A
Additional conditions/com	ments						
Student		Advisor	□ current majo	r □ desi	red major	Date	
Student		Advisor	current majo	r des	sired major	Date	
Director of Current Major	Date		- Reco	mmendation	APPROVE	DENY	
Director of Desired Major,	Date		Recommendation		APPROVE	DENY	
SECTION 3: TO B	E COMPLE	ETED BY PR	OFESSION	AL AD	VISOR		
Student must meet with the Professional Advisor Com		orofessional advi	isor to complete	an Acad	emic Improven	nent Plan.	
Professional Advisor		Pate			– AIP COMPLETED		
SECTION 4: TO B Comments	E COMPLE	TED BY CO					DENIED
2			Decisio				DENIED
		Date	College Dean or Designee				
			שמכ				

COMPLETED FORM SHOULD BE EMAILED TO THE REGISTRAR'S OFFICE.