

# TROY UNIVERSITY

CONDITIONAL STUDENT APPEAL FOR UNDERGRADUATE ENROLLMENT

Name: \_\_\_\_\_

Student I.D. \_\_\_\_\_

Last term/semester enrolled at TROY \_\_\_\_\_ Last Campus Attended: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

**Committee Decision: (indicate one of the following decisions):**

- READMIT \_\_\_\_\_  
Semester/Term \_\_\_\_\_ Date \_\_\_\_\_
- TRANSFER \_\_\_\_\_  
Semester/Term \_\_\_\_\_ Date \_\_\_\_\_
- APPEAL DENIED \_\_\_\_\_  
Semester/Term \_\_\_\_\_ Date \_\_\_\_\_

**PLAN FOR IMPROVEMENT**

**The following conditionals must be met to continue enrollment in Troy University.**

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Student Signature

\_\_\_\_\_  
Committee Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date