



Academic Renewal Application

Name: _____ Student ID # (LoLA) _____

Phone Number: _____ Email: _____

Mailing Address: _____

Program/Degree Plan: _____ Note: Please submit Change of Major Form if needed

Semester you wish to apply for Academic Renewal: Fall Spring Summer _____ Year

Academic Renewal provides undergraduate students who, after dropping out or being suspended because of academic deficiencies, have demonstrated sufficient maturation to be afforded an opportunity to begin college study again. Detailed policy can be found in the SLCC catalog.

To be eligible to apply for Academic Renewal, a student must meet the following conditions:

- No less than one semester must elapse between the end of the semester in which the student was last registered for credit at any postsecondary institution and the re-enrollment under Academic Renewal.
- A cumulative grade point average (gpa) of less than 2.00.
- Completed at least three credit hours toward a renewed program of study and have maintained a 2.00 gpa or higher since beginning with the renewed program.

Important: *Submission of this application does not ensure approval. Rather, the application will be evaluated by the student's Dean and approved only when the student convincingly demonstrates potential for success. If the application is denied, the student does have the right to appeal that decision with the Vice Chancellor of Academic Affairs.*

Please answer the following questions and attach your responses to this application form along with all supporting documentation (i.e. medical documentation). Documentation should address noted issues.

1. Provide a clear and concise explanation of the events/circumstances that were detrimental to your academic performance during the last term enrolled and previous terms in which your term GPA was less than 2.0.
2. Explain how your academic performance was affected by these events/circumstances.
3. Provide evidence that conditions have changed and that there is a reasonable expectation of satisfactory performance.

For Office Use Only:		
Renewal Approved Effective _____	Semester _____	Dean Signature and Date _____
Indicate any Special Conditions (i.e. limit credit hrs, etc.) _____		
Date Received _____	Date Processed _____	Registrar's Office _____