

SCHOOL OF EDUCATION Appeal Request – GPA

Name:	ame: Banner ID #					
Florida Sout	thWestern em	nail:				
Phone Numl	ber:					
GK Section((s) Passed:					
GK Section((s) Not Passeo	d:				
Date(s) Atte	empted:					
Please expla	in all strategi	es and resources	used to raise	your GPA:		
GPA for the	last three ser	nesters:				
Semester	GPA	Semester	GPA	Semester	GPA	
Education D	Department, I		ed to comple	d I am allowed to		
Signature				Date		
			anscript and	submit to the Edu	cation	
	Appeals Con	nmittee.				
DEPARTMENT	T USE ONLY					
Appeal Decision	n:					
Person Notifying	g:					
Student Notified	l on		through			
	(date)		(phone number or email)			