THAT ARE AND				ACADEMIC PROGRESS POLICY									
Inter American University of Puerto Rico Office of the Dean of Academic Affairs					APPEAL FORM								
1000ADA - 1912-12				Graduate Level									
Identification Number	Father's Surname			Mother's Maiden Surname				e Name Initial					
Campus	Home add	dress		Mailing Add									
Home Telephone													
Mobile Phone													
		E-mail											
	oss of eligibili		e financial	aid	Indicate	the acade	emic vear			-			
Image: Second pipe of a													
First semester Second semester First trimester Second trimester Third trimester													
□ First quarter (bimester) □ Second quarter (bimester) □ Third quarter (bimester) □ Fourth quarter (bimester)													
Check ($$) the circumstance(s) that prevented you from achieving satisfactory academic progress.													
□ Death of an immediate family member □ Personal illness or accident □ Other circumstances. Indicate:													
Loss of employment Image: Military deployment													
Relocation (moving)													
Explain how the checked circumstance(s) affected your academic progress.													
Explain the adjustments you will make in order to successfully continue your studies.													
You must include your Academic Agreement with this appeal. You should have discussed this plan with your academic advisor or a professional counselor. This plan must include the courses in which you will enroll during the coming terms and the grades you must earn in order to achieve the													
grade point average (GPA) required by	y your progra	am of study	and the 66	67% cor	mpletion rat	te (pace)	established	in the	Satisfacto	bry Acade	emic	Policy for	
undergraduate programs. You must s	sign this form												
Date:			S	tudent's	signature:								
		For Us	Е ВУ ТНЕ		s Соммі	TTEE							
Program of study:	General	ral GPA required by the program of study:											
		pletion rate / pace: earned credits/ attempted credits =											
The student explained the The reasons that prevented him from his		The student presented an Academic The student will be able to ach Agreement signed by the academic satisfactory academic progress											
		Agreement signed by the academic satisfacto advisor or professional counselor. complies					<i>i</i> th the	• •	Academic				
achieving satisfactory academic achieve satisfactory academic progress.									Agreement.				
	ES 🗆 NO 🛛 🖓 YES 🗆 NO 🔤					YES 🗆 NO				NO			
Appeal granted:		Date	Month	Day	Year			Date	Month	Day		Year	
	ancial aid						al denied	Date					
		SIGNATUR	RES OF TH	IE COMN	NITTEE ME	MBERS							
Dean of Academic Affai	irs or represe	entative				De	an of Stude	ents or	represer	tative			
Director of Financial Aid or representative Professional Counselor													
Apprised													
	re of the Chie	of Executive	Officer		_	_		<i>י</i> ח	ate		_		
Original Registrar s Office Copy	Student	Copy Fina	ancial Aid	C	opy Guida	nce & Cou	inseling	С	opy Dea	n of Acad	emic	Affairs	