ACADEMIC RENEWAL FORM

The Academic Renewal policy allows University System of Georgia degree-seeking students who have experienced academic difficulty to make a fresh start after an absence of five calendar years from any and all colleges of universities and to have one final opportunity to earn an associate and/or bachelor’s degree.

Former Developmental Studies/Learning Support students may apply for Academic Renewal only if they successfully completed all DS/LS requirements before the commencement of the five-year period of absence.

If a student does not request Academic Renewal status at the time of re-enrollment after a five-year or greater period of absence from any college or university, the student may do so within two academic semesters of re-enrollment or with one calendar year, whichever comes first.

_____________________________________________             _____________________________
Name       Student ID Number
__________________________     _________________________    _______________________
Term of re-entry      Date of last enrollment                         Major

Briefly state why you are requesting Academic Renewal:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

I have completed all Developmental Studies courses. I understand that all courses with a grade of “D” or “F” must be repeated if they are required in my program of study.

Approved / Denied

________________________________________________________________________________________
Student Signature         Date

________________________________________________________________________________________
Lisa Lesseig                Date
Registrar/Director of Admissions
Academic Renewal to begin _________________

Signature

Date

Registrar/Director of Admissions

Academic Renewal to begin _________________