GRADUATE COLLEGE NORTHEASTERN STATE UNIVERSITY 601 N Grand Ave Tahlequah OK 74464-2399

(918) 444-2093 Fax: (918)444-2295

PETITION FOR GRADUATE STUDENT APPEAL

Name:	Social Security # or NSUID #				
(Please Print)					
Address:		Will you appear before the council? Y		YES	NO
		E	Expected Graduation Date: _		
City	State	Zip			
Degree Program:					
What year was your adm	ittance into the Graduate	e College program?	?		
Request appeal consider (Example: suspension, ti					
Please attach supporting	documents to this form.	Rationale for the a	appeal:		
	_				
Signed:			Date:		
(Student's Signa	ature)				
			uring the Fall and Spring Graduate Council Meetin		ers.
Tour pennor	will be presented at a		Graduate Council Meetin	g. 	
	OFF	FICE USE ONLY			
		L MEMBER RECOMM	ENDATION		
Graduate Council Recomme	ends this appeal be:	Approved	Denied		
Signed:			Date:		
(Dean, Graduate Co	illege)		Date:		
Original: Student file/Copi	es: Student, Graduate Prog	ıram Advisor, Gradua	te Council File		
			Revis	sed 2/20/	/2012