

Subject of Appeal (check appropriate box)

APPEAL INFORMATION

- Admission to Armstrong Atlantic State University (Never Attended AASU)
- Readmission to Armstrong Atlantic State University (Previously Enrolled At AASU)

Items to be included with your appeal:

All documentation must be submitted to the Registrar's Office, Victor Hall 104, by the deadline

1. Current copy of student high school and/or college transcript.
2. Attach a typewritten essay that clearly articulates the reasons why your appeal should be considered by the Academic Appeals Committee.

The deadline for appeals is 9:00am 2 days before the first day of AASU classes (according to the official AASU calendar). Appeals received after the 9:00am deadline will be considered only for a subsequent term. The Appeals Committee will meet during registration to review appeals. Admission Appeal applicants will be contacted via telephone. Readmission Appeal results will be available at www.ship.armstrong.edu. The student is responsible for checking his/her registration status.

CERTIFICATION

I certify that all statements made in this appeal application are complete and true. I also understand that falsification of or failure to provide information requested may result in denial of acceptance to the university. If my appeal is granted and I become a student, I agree to abide by the published regulations of the university and the policies of the Board of Regents of the University System of Georgia. If you have ever been convicted of any criminal offense other than a traffic violation, please attach a detailed explanation.

Date _____ Signature of Applicant _____

Armstrong Atlantic State University is an affirmative action/equal opportunity education institution and does not discriminate on the basis of sex, race, age, religion, disability, or national origin in employment, admissions, or activities.

For Office Use ONLY: Do Not Write in this Space

Freshman Applicant

SAT V _____
 M _____
 W _____
 ACT E _____
 M _____
 W _____
 HS GPA _____

Transfer Applicant

No. Hours _____
 Transfer GPA _____
 Min. GPA Needed _____
 (If Applicable)
 SAT V ____ ACT E ____
 M ____ M ____
 W ____ W ____
 HS GPA _____

Readmission Applicant

Suspension # _____
 Sem. Last Attended _____
 No. AASU Hours _____
 AASU GPA _____
 Transfer Hrs. _____
 Transfer GPA _____
 Min. GPA Needed _____
 (If Applicable)
 SAT V ____ ACT E ____
 M ____ M ____
 W ____ W ____

Type of Appeal

- Academically dismissed/ suspended from prior institution
- Low Transfer GPA
- SAT/ACT scores below Admissions standards
- Related to AASU academic suspension or exclusion
- College Preparatory Curriculum Deficiency

Date Sent to Committee _____ All Documents Received? _____

Comments: _____
