

Administrative Use Only		
Date Received:	Received By:	

## **Academic Review Board Petition**

The Academic Review Board (ARB) recommends corrective measures for students identified as academically at-risk. The ARB includes one Vice Provost or Department Chair and two faculty at-large members. The ARB may impose certain restrictions, including but not limited to registration, academic requirements, and academic support services. The Academic Review Board has the authority to define the courses that a student must take in the subsequent semester. It is the student's responsibility to follow the direction of the ARB, and failure to do so may result in registration holds or other negative consequences up to and including suspension from the University.

STUDENT ID:		
		@floridapoly.edu
PHONE:	CURRENT TERM:	YEAR:
LOCAL ADDRESS STREET:		
CITY:	STATE:	ZIP CODE:
Plan of Action: 100-word reflective st	atement that includes steps you will take to	improve your academic behavior.



**List your proposed courses for next semester** 

Course Number	Course Title	Credit hours
<i>- ,</i>	ommended courses. that includes your proposed time management strategy for next seme	ster to include, study time,
	student activities and clubs time, recreation/leisure time, work time,	

My signature confirms that I understand my continued enrollment with the university is contingent upon the recommendations of my Academic Review Board and the Provost, and that the decision of the Provost may not be appealed. I further understand that my Academic Review Board Chair may require me to appear in person or remotely via Teams if the board requires additional information from me. Failure to follow the direction provided by the ARB may result in registration holds or other negative consequences up to and including suspension from the University.

Student's Signature:	Date:
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