

REQUEST FOR ACADEMIC CLEMENCY – UNIVERSITY OF ARKANSAS AT MONTICELLO

Request is being made by: _____ ID # _____
 (student name – please print)

To be considered for academic clemency, the following qualifications must be met:

1. I have not been enrolled in any institution of higher education for a period of five years.
 Yes _____ No _____

2. I am currently enrolled at UAM, and this is my first semester of enrollment at UAM.
 Yes _____ No _____
 - or -
 I am currently enrolled at UAM, and this is my first semester of return to UAM after being absent for at least five years.
 Yes _____ No _____

To be considered for academic clemency, you must also agree to all of the following stipulations:

1. All grades and credits earned in all semesters for which clemency is granted will be forfeited.
2. All grades and credits for which clemency is granted will not count in computing GPA or in meeting requirements for graduation.
3. The transcript will continue to contain the entire academic record, including the grade earned for each course. However, a notation will be made showing the semesters for which academic clemency was granted. The credit hours will become zero.
4. Academic clemency can be granted only once in an individual’s academic career and such declaration and granting is final and irreversible.
5. In regard to financial history, state and federal regulations take precedence over the institutional policy of academic clemency.
6. The academic clemency at UAM pertains only to UAM and other institutions may or may not honor this policy.

I agree to the stipulations above as evidenced by my signature below. I realize that if academic clemency is granted, it cannot be reversed.

 Signature of Student

 Date

 Signature of Advisor (*Attach copy of Transcript*)

 Date

 Signature of Unit Head

 Date

 Signature of Provost Approved Not Approved

 Date

 Received by Registrar Recorded

 Date