



Graduate Student Probation Removal Form

Student's Name: _____

Student's Campus ID: _____

Program: _____

Graduate Program
Representative Signature: _____

Date (Current): _____

A Probation Removal Form must be submitted for each student who is being removed from probation. Please retain a copy for your files. Submit all original forms to the Graduate Records Office, Mitchell 261.

Please notify the student of this action.