



Recommendation for Probation or Dismissal

All probation and dismissal recommendations must be submitted to the Graduate School by the Program Director or the Department Chair. Only the Graduate School may officially place students on probation or dismiss them from their program. Colleges and/or graduate programs may not place students on probation, nor dismiss students from a graduate program unless authorized to do so by the Graduate School. If the request is approved, students have ten business days to appeal the probation/dismissal decision.

Student Name: _____ NSHE #: _____

Graduate Program: _____ Advisor Name: _____

I recommend probation dismissal of the aforementioned student per the following reasons (Please provide documentation of the student's failure to meet the specific provisions(s) of the Graduate School's Academic Standing and Dismissal Policy unr.edu/grad/student-academics/academic-standing-and-dismissal (4000 character limit). Additional supporting documentation may be attached (optional):

Probation Remediation Instructions: In case of a probation request, describe the requirements or conditions, **including deadlines** that the student must complete in order to return to good standing. Probation is typically granted for one semester, though a longer probationary period can be requested if so justified. Requirements and conditions may include, but are not limited to, the completion of specific courses, completion of a specific set of academic or clinical requirements, thesis drafts or advisory committee meetings, or the prohibition to withdraw from courses during the probationary period. Requirements and conditions must be clearly defined and realistic; their completion by the end of the probationary period must allow the student to return to good academic standing, or be dismissed from the program. (4000 character limit):

Not Accepted for Submission

Initiator (Program Director or Department Chair):

Name **Date** **Signature**

Recommending Party (Dean of the College or the Director of the Interdisciplinary Graduate Program):

Name **Date** **Signature**

Approving authority:

Accept Decline

Graduate School Dean Name **Date** **Graduate School Dean Signature**

Comments:

Sample
Not Accepted for Submission