



KEAN UNIVERSITY

Academic Amnesty Application

Date of Application: _____

Circle one: Mr., Mrs., Ms., Mx.,

Name _____

Student ID#: _____

Current Address: _____

Daytime Phone: _____

E-mail: _____

1. Choose the reason for your application (please see Instructions page for definitions of Readmission versus Reinstatement):

_____ I am seeking Readmission, and I understand I must complete the separate application for Readmission, by the published deadlines and meet all listed criteria.

_____ I am seeking Reinstatement, and I understand I must also submit a written appeal to the Academic Standards Committee

2. When did you last attend Kean University? Semester _____ Year _____

3. I understand that I must be away from Kean University for a minimum of two years to be eligible for amnesty. By checking below, I certify (choose only one):

_____ I have been away from Kean University for a minimum of two (2) years and **HAVE NOT** attended another institution since my departure.

_____ I have been away from Kean University for a minimum of two (2) years and **HAVE** attended another institution(s) since leaving.

Please list all institutions, dates attended, and any degrees you have earned*:

| College/University Name | Dates Attended | Degree (if applicable) |
|-------------------------|----------------|------------------------|
| _____ | _____ | _____ |

**Send official transcript(s) to the attention of the Office of Admissions and inform the Chair of the Academic Amnesty Committee as to when that information was sent for reference.*

4. For what semester(s) are you seeking amnesty? Semesters must be consecutive. **If granted, all grades and credits for that(those) semester(s) will not be counted in your cumulative average, but the course(s) will remain on your permanent record.**

Semester _____ Year _____

to

Semester _____ Year _____

5. If you are granted Academic Amnesty, and are reinstated/readmitted, what major will you be pursuing? **Please note:** this is for purposes of committee review only. If you are reinstated, you will need to fill out a Change of Major form upon re-enrollment (if you meet the required criteria). If you are seeking readmission, you must put this intended major on your application for readmission.

Check one: ___ B.A. ___ B.F.A. ___ B.I.D. ___ B.S. ___ B.S.N. ___ Other degree _____

Intended Major _____

6. Reason for appeal (please check below as it applies to your situation): **Application must include a formal letter of request stating why you should be awarded amnesty.**

_____ Evidence of Academic Growth:

You must have attended another institution since leaving Kean University (listed in question 4) and have current, official transcripts submitted to the committee.

_____ Evidence of Personal Growth/ Resolution of Extenuating Circumstances (must provide relevant appropriately dated documentation).

_____ Personal Medical Issues (sample documentation can include, but is not limited to doctor's notes, hospital bills, etc. See guidelines for submitting medical documents on the Instructions document.)

_____ Family Medical Issues (sample documentation can include, but is not limited to, doctor's notes, death certificate, etc.)

_____ Financial Issues (sample documentation can include, but is not limited to: proof that outstanding bills that have since been paid, new job, etc.)

_____ Military Service (sample documentation can include, but is not limited to enlistment and discharge papers)

_____ Personal/Family issues (sample documentation can include, but is not limited to court papers/legal documentation, police reports.)

_____ Other (please describe in attachment)

I understand that the decision of the Academic Amnesty Committee is final and may not be appealed. I can apply for Academic Amnesty only once and the action is irreversible. I have attached all appropriate documentation to assist the committee in its deliberation. I understand an Application for Academic Amnesty does not guarantee approval. I understand that it is my responsibility to investigate if will be Financial Aid and/or Student Accounting implications for receiving Amnesty and that it is my responsibility to resolve them with the appropriate office(s). I also understand that not all institutions, certifying agencies, etc. will accept Academic Amnesty. I certify by signing that everything in this application is true, and I have read the Academic Amnesty Policy and Application Instructions.

Applicant's Printed Name _____

Applicant's Signature _____