



GRADUATE RETENTION REVIEW

Graduate School, Rendleman Hall, Room 2202
Campus Box 1046, Edwardsville, IL 62026
Phone (618) 650-3010 Fax (618) 650-3523

Departments must complete this form for students with 15 GPA hours or more whose cumulative GPA fell below the required minimum as stated in graduate policy (3.0 for master’s and certificate candidates, 3.25 for specialist candidates). The completed form should be submitted directly to Dr. Lynn Maurer, Associate Dean, Graduate School, Box 1046, or as an e-mail attachment to лмаурер@siue.edu.

Student’s Name _____ Student’s ID _____ International? Y N

Graduate Program _____ Cumulative GPA _____ Grad. Assistant? Y N

Semester and Year for this review _____ Hours completed _____

DEPARTMENT SECTION:

Department Recommendation:

_____ Retention _____ Dismissal _____ Student has dropped the program

Plan for Retention/Dismissal:

Retention recommendations must include a plan to improve the GPA, if any course must be retaken, and any other stipulations below. The student’s signature is required for retention recommendations only. If student is not present for signature, an email from the student is sufficient.

Plan for Retention if applicable:

Course with grade below B, C, or with Incomplete or DE	Grade	Indicate if the course is to be retaken and which semester	Date or semester by which GPA must be at required minimum:

Department Comments:

Graduate Program Director’s Name printed _____

Graduate Program Director’s Signature and Date _____

(if applicable name and signature of advisor other than Graduate Program Director)

STUDENT’S SECTION:

The retention plan above has been designed for your academic success. Failure to maintain this standard may result in dismissal. The student’s signature (or e-mail from the student) is required for retention recommendations only.

Signature _____ Date _____

FOR GRADUATE SCHOOL USE ONLY:

_____ Approved _____ Denied

Comments:

Signature: Dean of the Graduate School _____ Date _____