

Appeal Provision for the IUP Three Step Process for Teacher Certification

A student who believes that any requirement of this policy has been inequitably applied or that

Date: _____

Student Name: _____

Banner ID: @ _____

Major Course of Study: _____

Advisor: _____

Number of Credits Completed to Date: _____

Current QPA: _____ as of _____

Campus Address: _____

Street Address

City