

In the application for First-Year Student Forgiveness, the applicant must indicate why other options (such as the Course Repeat Option or the later course withdrawal deadline for first-semester freshmen), were or are not being exercised. As a general rule, First-Year Student Forgiveness will be approved only for those courses that were taken to satisfy program requirements that no longer apply, due to a change in major. In particular, courses that were taken solely to satisfy CCC requirements, or as electives, should be repeated rather than forgiven.

3. Provide a brief rationale (one or two paragraphs) for the request to have these courses forgiven.

Once the above part of the application has been completed, it should be sent electronically to:

Professor Samantha Kenney, Chair
Academic Forgiveness Committee
samantha.kenney@fredonia.edu

The original hard copy of the form, including the original signatures of the applicant, the advisor, and the department chair, should be delivered to the Office of Academic Affairs, Reed Library 119, or sent via campus mail.

Signature Page

4. *Applicant*: I have completed this application for First-Year Student Forgiveness with the help of my academic advisor. I understand that:
- (1) If a course in which I received a grade of D-, D, or D+ is forgiven, then I will lose credit for the course, including any CCC credit.
 - (2) If my application for First-Year Student Forgiveness is approved, then I cannot later apply for either of the other two academic forgiveness options (*Restart Option* or *Academic Bankruptcy*) during my undergraduate career at SUNY Fredonia.

Signature:

Date:

5. *Academic Advisor*: I have reviewed this application.
I endorse the application.

Signature:

Date:

6. *Department Chair or Program Coordinator*: I have reviewed this application.
I endorse the application.

Signature:

Date:

7. *Dean*: I have reviewed this application.
I endorse the application.

Signature:

Date:

8. *Recommendation of the Academic Forgiveness Committee*:
- Approve Partially Approve Do Not Approve

Comments:

Signature:

Date:

9. *Decision by the Vice President for Academic Affairs*:
- Approve Partially Approve Do Not Approve

Comments:

Signature:

Date: