

The Graduate School
1501 W. Bradley Ave.
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BRADLEY
UNIVERSITY

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Removal of Conditional Status

- Directions:**
1. Meet with your academic advisor and program coordinator to determine if all conditions for admission are completed.
 2. Complete the information on this form.
 3. Obtain your program coordinator's comment and signature, and ask that he/she retain a copy.
 4. Deliver the original of the completed form to the Graduate School, and retain a copy for your records.

To Be Completed By the Student

Name: _____ BU ID#: _____
Surname/Family/Last Given/First Middle Maiden/Other

Mailing Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Work Phone: _____ E-mail address: _____
(Include area code) (Include area code)

Semester and year of conditional admission to graduate program: _____

Student Signature: _____ Date: _____

To Be Completed By the Graduate Program Coordinator

Action taken by student to remove condition of admission (include date that the action was taken/completed):

Graduate program coordinator signature: _____ Date: _____