

MOREHEAD STATE UNIVERSITY POLICY FOR ACADEMIC BANKRUPTCY

Policy

It is the policy of Morehead State University to permit an eligible student under specified conditions to petition for relief from academic sanctions imposed through mathematical calculations for the Grade Point Average (G.P.A.) for programmatic or graduation requirements. The requirements for eligibility and the operational procedures follow.

Specific Conditions of Academic Bankruptcy

The specific conditions governing the implementation of the policy on academic bankruptcy are considered as addenda to the policy statement.

1. The undergraduate student who applies for and is granted bankruptcy forfeits credit for all courses attempted for only one specified school term during pre-baccalaureate studies.
2. Once bankruptcy status has been granted, the decision is irreversible.
3. The marks and credit hours earned during the school term in question are considered a part of the student's permanent record and will be so recorded on the transcript. A notation will be made, however, to indicate the bankruptcy and no work attempted during the term will be considered for any requirements of Morehead State University.

Eligibility

Only hours attempted at Morehead State University are considered for bankruptcy; transfer hours are excluded. The requirements for academic bankruptcy are:

1. The student must apply for bankruptcy before completing a bachelor's degree at the University.
2. The student must have attempted a minimum of 30 semester hours at the University.
3. For the term in question, the student must have a grade point average of at least 1.00 under the cumulative average for all other hours completed at the University.

Procedure

To apply for academic bankruptcy, the student obtains an Academic Bankruptcy form in the Office of the Registrar or by downloading the form at www.moreheadstate.edu/registrar.

The student is required to meet with the appropriate academic advisor or department chair/associate dean for review of the student's petition for Academic Bankruptcy.

1. The student will initiate action by presenting a completed application form requesting academic bankruptcy status for a specified term to the advisor or department chair/associate dean.
2. This form, signed by the advisor or department chair/associate dean, will be delivered to the Office of the Registrar for verification of eligibility.
3. The Office of the Registrar will notify the petitioning student, advisor or department chair/associate dean by email regarding eligibility.
4. The petitioning student, upon notification that the request to bankrupt has been denied, has the right to appeal. Appeals of the eligibility ruling are made through the Office of Undergraduate Education and Student Success.

MOREHEAD STATE UNIVERSITY PETITION FOR ACADEMIC BANKRUPTCY

(Please read 'Policy' on other side before filling out this Petition)

Name: _____ <div style="display: flex; justify-content: space-between; width: 100%; font-size: small;"> Last First Middle </div>			Date: _____
E-mail Address: _____ _____		Phone #: _____	
		MSU ID #: _____	
Declared Major at Morehead State Univ.: _____		Total number of semester hours attempted at MSU (minimum 30): _____	

TERM TO BE BANKRUPTED:	<input type="checkbox"/> Fall <input type="checkbox"/> Summer I <input type="checkbox"/> Spring <input type="checkbox"/> Summer II	Year: _____
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COURSE NO.	COURSE TITLE	SEMESTER HRS. ATTEMPTED	GRADES

Total Attempted Semester Hours Requested for Academic Bankruptcy: _____

TO BE SIGNED BY STUDENT
<p>To the best of my knowledge, I have met the requirements for Academic Bankruptcy as set forth in UAR 106. I also realize the effects that Academic Bankruptcy will have on my status relative to academic programs and degree requirements, as well as financial aid, athletic eligibility and eligibility for extra-curricular activities.</p>
_____ Student's Signature
_____ Date

TO BE SIGNED BY ADVISOR or DEPT. CHAIR/ASSOC. DEAN
<p>I have been apprised of the above student's desire to bankrupt and I understand that my signature does not affect the approval or disapproval of this request.</p>
Advisor or Department Chair/Associate Dean: (please print) _____
_____ Student's Advisor or Department Chair/Associate Dean Signature
_____ Date

TO BE COMPLETED BY REGISTRAR
<p>The student listed above has been: <input type="checkbox"/> approved <input type="checkbox"/> disapproved; {reason _____}</p> <p>for Academic Bankruptcy for the term _____.</p>
_____ Registrar's Signature
_____ Date