

Removal of Conditional Status

This form should be used when a student has met all admission conditions.

Please complete this form and return to the Registrar's Office

COMPLETE ALL REQUESTED INFORMATION AND OBTAIN ALL REQUIRED SIGNATURES

Name: _____

Fredonia ID _____

Admission conditions:

Please describe how the student has met the conditions:

REQUIRED SIGNATURES by the following offices:

<i>Office Name & Location</i>	<i>Signature</i>	<i>Date</i>
Chairperson's Signature		