



LOW GPA REMEDY COMPLETION FORM

You will not be allowed to register as a graduate degree student until this form is received, processed and you have formally been accepted into the graduate program. It is imperative that this form is received by the Graduate Admissions Office in order to ensure your admission status is accurate.

Name: _____ Email: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

BEAR ID: _____ Program: _____

Please check off the completed remedy below:

Required minimum GPA met at a non-Bridgewater State University institution (official transcripts must be submitted)

Required minimum GPA met at Bridgewater State University

Passing score on Massachusetts Test for Educator Licensure (MTEL), if required (score results must be submitted)

Signature: _____ Date: _____