

College of the Siskiyous Counseling and Student Support Programs

Petition for Academic Reinstatement after Dismissal

Instructions to student: Complete items 1 and 2 below, then contact the Counseling and Student Support Programs Office (530) 938-5353 or, if you receive DSPS services, the Disabled Student Programs & Services Office (530) 938-5297 to schedule an appointment to meet with a COS counselor for an academic reinstatement appointment. The remainder of the form will be completed during your appointment.

First Name: _____ **Last Name:** _____ **S#** _____

Petition for Semester: **Fall** **Winter** **Spring** **Summer** **Year:** _____

As a student who has been placed on academic or progress dismissal, I am petitioning to be re-admitted.

1. The reasons I did not make satisfactory academic progress were:

2. My plans to ensure satisfactory academic progress are:

I agree to participate in the following activities that will assist me to achieve academic success:

- I will meet with my COS counselor for a follow-up appointment. My next appointment is _____
- I will update my educational plan with my COS counselor.
- I will update my counselor on circumstances that may affect my ability to make satisfactory academic progress.
- I will attend all classes in which I am enrolled on a regular basis and complete all class assignments.
- I will request and receive tutorial assistance and inform the tutoring coordinator if my needs have not been met.
- I will attend academic workshops, specifically covering: _____
- If I qualify for Disabled Student Programs & Services (DSPS), or if I think I have a disability, I will contact DSPS to inquire about, or apply for, services.
- I accept the enrollment limitation of a maximum of _____ units for the semester noted below.
- I agree to complete all of my courses for the _____ semester with grades of A, B, or C to be eligible to attend COS in the _____ semester/year.
- A Petition for Reinstatement must be completed with a COS counselor each semester until your cumulative GPA is at least 2.0 and you have completed at least 50% of the cumulative units in which you have enrolled.
- I will follow up on specific recommendations given by my counselor:

Counselor Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

Reinstatement DENIED for sem/yr _____ May re-petition to attend COS for sem/yr _____

Reinstatement APPROVED for one semester: sem/yr _____

Copies: Student Advising File **Date Entered into Banner:** _____