

Petition to the Committee on Academic Policy & Standards

Due Date: _____

Petition For:

- Appeal of Dismissal
- Readmission
- Appeal of Denial

I. Date: _____

Name: Last: _____ First: _____ Middle Initial: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Telephone: (Cell) _____ (Home) _____

Last 4 Digits of Social Security Number: _____ Date of Birth ____/____/____

Student ID: _____ York College Email: _____

II. Requesting for: Fall Winter Spring Summer Year: _____

Major: _____

Since leaving York College, have you attended another college/university?

No

Yes Name of Initiation _____ Date Attended _____

YOU MUST ATTACH COPY (IES) OF THE TRANSCRIPT (S) TO THE PETITION.

III. **PERSONAL STATEMENT:** All students seeking readmission or appealing dismissal must submit a typed personal statement and supporting documentation that address: the reasons for your past academic difficulties, plans for improved academic performance if readmitted, and any activities you have engaged in that would indicate a probability for future academic success. **Please include a plan on how you will be successful if allowed readmission to York College.**

I hereby certify that all the above information is accurate and complete. I understand that the information in this petition will be kept confidential and will be used for the Committee's purpose only.

Student Signature: _____ Date: ____/____/____

Personal Statement Documentation No Documentation Initial _____

Approved Denied

Committee Comments:

Petition Received Stamp Here

Chairperson's Signature

Meeting Date