



## Undergraduate Readmission Petition Instructions

**DEADLINES:** July 15 for FALL Readmission November 15 for SPRING Readmission

**\*\*NO SUMMER READMISSION\*\***

**DISMISSED STUDENTS MAY NOT RETURN TO ISU FOR AT LEAST ONE FULL FALL OR SPRING SEMESTER.**

Late petitions will not be accepted. Only complete applications will be reviewed by the Readmission Petition Committee.

### **SUBMITTING YOUR PETITION**

1. Submit a completed admissions application as a **Former ISU Student** and pay the application fee. You can find the online application here: **Apply to ISU**
2. All prior ISU finance charges (parking citations, tuition, fees, etc.) must be paid and your account must have a balance of \$0 with no financial holds.
3. Meet with the **academic advisor** from your major department for assistance with completing your Readmission Petition Application. This will be a multi-appointment process and it is your responsibility to schedule the initial AND follow-up appointment(s) with your advisor.
  - Discuss the events that led to your dismissal and how you plan to be academically successful.
  - Develop a **REQUIRED** Three-Semester Plan of Study. Consider your time constraints (e.g. job, children, other obligations) when determining credit load.
4. Complete all sections of the Readmission Petition Application. **Make sure you include all documentation needed to support your petition** (checklist on following page).
5. Write a thoughtfully prepared statement that explains the circumstances that led to your dismissal(s).
  - Identify the corrective measures you have taken to demonstrate your academic readiness. This should include study strategies and utilization of appropriate ISU Resources for future academic success if readmitted.
6. Complete the Time Management Worksheet to help confirm you can meet all obligations, including time for classes, studying, employment hours, childcare responsibilities, and other obligations.
7. Gather any letters of recommendation from someone who has supervised you in a work, academic, or volunteer setting. **The recommender cannot be related to you.** Letters of Recommendation from a Career Counselor are also acceptable. All letters of recommendation must either be on official company letterhead or emailed directly from a business email address of the recommender.
8. If you are attending or have attended another institution (since your dismissal from ISU) provide a copy of your unofficial transcript(s) in your petition. An official copy will be required by the Office of Admissions.

### **AFTER SUBMITTING YOUR PETITION**

#### **IF APPROVED:**

1. You will receive a phone call followed up with an email regarding the approval of your readmission petition application. This will include a copy of your complete application and guidelines for your next steps.
2. Register for the advisor approved classes from the first semester of your three semester plan of study.
3. If you plan on using Financial Aid, you will need to talk with your advisor about completing a Financial Aid Appeal. More information on starting this process can be found at this link: **Financial Aid Appeal**

#### **IF DENIED:**

1. You will receive a phone call followed up with an email regarding the denial of your readmission petition application. This will include a copy of your complete application and guidelines for your next steps.



## Readmission Petition Checklist

Submit the Readmission Petition Application and all supporting materials to your Academic Advisor prior to the deadline. Make sure each document is filled out correctly and truthfully. Your Academic Advisor will send it to the Office of Academic Advising and the Readmission Petition Committee once all required materials are received.

### **Required Sections and Documents:**

- Readmission Petition Application
- Time Management Worksheet
- Required Three Semester Plan of Study
- Terms and Conditions Agreement
- Personal Statement
  - Identify the semester(s) you were dismissed.
  - Explain the circumstances that led to your dismissal(s).
  - Identify corrective measures you have taken and plan to take to demonstrate your academic readiness for readmission.
  - Include documentation that supports your claim of academic readiness.
- Supporting documents
  - Any letters of recommendation from a current employer, therapist, doctor, career counselor, etc.
  - Unofficial transcript(s) from Idaho State University provided by your advisor
  - Any other transcripts from other institutions you attended during your dismissal
  - You may be required to provide additional supporting documentation if requested by the Readmission Petition Committee.



# Undergraduate Readmission Petition Application

This petition must be advanced to the Office of the Registrar and the Office of Admissions

Personal Information		
Name:	Student/Bengal ID:	Date:
Address:		
City:	State:	Zip Code:
Phone:	Email:	

Academic Information
Last Term Attended: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: _____
Semester of Requested Readmission: <input type="checkbox"/> Fall <input type="checkbox"/> Spring Year: _____
Previous Degree and Major Pursued:
Intended Degree and Major (if readmitted):
Have you attended any other schools since ISU? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, submit transcripts for evaluation)

Advisor Section
Do you recommend readmission? <input type="checkbox"/> No <input type="checkbox"/> Yes
Provide an explanation regarding the above decision (required): _____ _____ _____ _____
_____ Advisor Name
_____ Advisor Signature
_____ Date

Office of Academic Advising (Office Use Only)					
_____ Executive Director Signature	_____ Date	<table border="0"> <tr> <td><b>Notified all Parties:</b></td> <td>Office of the Registrar <input type="checkbox"/></td> <td>Office of Admissions <input type="checkbox"/></td> </tr> </table>	<b>Notified all Parties:</b>	Office of the Registrar <input type="checkbox"/>	Office of Admissions <input type="checkbox"/>
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# Terms and Conditions

Review, sign, and initial in the designated areas.

<input type="checkbox"/> I will register for the courses on your advisor approved Required Three Semester Plan of Study.
<input type="checkbox"/> I understand I will remain on Academic Probation every semester until I earn at least a 2.00 cumulative GPA.
<input type="checkbox"/> I will contact each of my instructors regarding my progress throughout the semester and particularly at mid-term.
<input type="checkbox"/> I will meet with my major advisor each semester
<input type="checkbox"/> I will seek academic assistance this semester and in future semesters from these resources: <ul style="list-style-type: none"> <li>▪ Writing Center 282-3662</li> <li>▪ Content Area Tutor 282-3662</li> <li>▪ Math Center 282-3662</li> </ul> <p><b><u>Other ISU Resources:</u></b></p> <p>TRIO Student Services- Museum Building (208) 282-3242</p> <p>Disabilities Services- Rendezvous Complex (208) 282-3599</p> <p>Student Success Center- Rendezvous Building (208) 282-3662</p> <p>Adult Success Center- RFC Building (208) 282-2468</p> <p>Financial Aid and Scholarships- Museum Building (208) 282-2756</p> <p>Office of Academic Advising- Museum Building (208) 282-3277</p> <p>Veterans Services- Pond Student Union (208) 282-4298</p> <p>Career Center- Museum Building (208) 282-2380</p> <p>Counseling and Mental Health Center- Graveley Hall (208) 282-2130</p>

## Certification and Agreement

I certify that all of the information reported in this application is complete, true, and correct. I understand that I may be asked to provide additional documentation, if needed. I understand that any false information could result in immediate denial of readmission. I understand that my continued enrollment at Idaho State University depends on my earning a minimum of a 2.00 semester and cumulative GPA. I also understand if I am not able to comply with the university standards set forth I will no longer be a student at Idaho State University.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



# Time Management Worksheet

Use this worksheet to indicate your weekly obligations for your first semester of readmission to Idaho State University. On the time management table, make sure to include desired time frames for employment hours, childcare responsibilities, and other obligations, along with time for attending classes and studying. Plan three (3) hours of study time for each credit you are planning to take (e.g. 12 credits requires a minimum of 36 hours of study time per week).

1. If readmitted, I plan to work \_\_\_\_\_ hours per week.

2. In addition to school and work, my other responsibilities include:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Taking the above information into consideration, I plan on enrolling in \_\_\_\_\_ credits for my first semester back at Idaho State University.

CRN ex: 11280	Dept. Crse Sec ex: ENGL 1101 01	Course Title ex: English Composition	Days ex: M W F	Time ex: 9:00-9:50	Credits ex: 3	Location ex: LA 207



# Time Management Worksheet continued...

Time Management Table

TIME	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
6:00 am							
6:30 am							
7:00 am							
7:30 am							
8:00 am							
8:30 am							
9:00 am							
9:30 am							
10:00 am							
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7:00 pm							
7:30 pm							
8:00 pm							
8:30 pm							
9:00 pm							
9:30 pm							



# Required Three Semester Plan of Study

**With your advisor:**

- Review and discuss your academic history and trends that led to your dismissal. Go over strategies and appropriate ISU Resources for future academic success if readmitted.
- Create **at least** a three (3) semester plan of study. Make sure to take into consideration obligations outside of school (e.g. work, family, other) when determining credit load for each semester.
  - Consider course repeats to help increase GPA and include only courses necessary for the degree.
  - A minimum of 6 credits per semester will be required to be considered for Financial Aid.

Semester:		
Course Title	No. Credits	Repeat?

Semester:		
Course Title	No. Credits	Repeat?

Semester:		
Course Title	No. Credits	Repeat?

Semester:		
Course Title	No. Credits	Repeat?

Semester:		
Course Title	No. Credits	Repeat?

Semester:		
Course Title	No. Credits	Repeat?

_____ Advisor Name	_____ Advisor Signature	_____ Date
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