

# Ohio University College of Health Sciences & Professions Petition for Reinstatement After Academic Dismissal

This petition for reinstatement should be completed if you are applying to return to Ohio University after an absence of one academic term or more and **must be submitted by August 1 for fall semester consideration or by December 15 for spring semester consideration.**

- Petitions received after the posted deadlines will be held for review the following academic term.
- Submitting a Petition for Reinstatement is not a guarantee of reinstatement to Ohio University.
- The Petition for Reinstatement should be legible, reflect an honest assessment of your strengths and challenges, and be completed with care and deliberation.
- If you are off campus, you may mail your Petition for Reinstatement to **Office of Student Services, 370W Grover Center, 1 Ohio University, Athens, OH 45701. You may also email [chspss@ohio.edu](mailto:chspss@ohio.edu) or fax to 740-593-0285.**

**PLEASE NOTE:** This Petition for Reinstatement to Ohio University addresses only the possibility of reinstatement to the university and not the status of your financial aid. It is possible that your financial aid may be suspended even if you are reinstated to the university. You are strongly advised to contact the office of Student Financial Aid to determine your eligibility for financial aid.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

PID# \_\_\_\_\_ OHIO ID: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Personal email Address \_\_\_\_\_

Last Campus Attended \_\_\_\_\_ Total Hours Earned \_\_\_\_\_

Last Term Attended: Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ // Year \_\_\_\_\_

Campus You Wish to Attend \_\_\_\_\_ Intended Major \_\_\_\_\_

Term You Hope to Return (circle one): Fall Spring Summer // Year \_\_\_\_\_

Have you attended another college or university since your dismissal from Ohio University? Yes No

If yes, which institution(s): \_\_\_\_\_

**\*\*Official transcripts must be submitted along with your Petition for Reinstatement\*\***

Carefully consider the following questions and record your answers to each in a Word document.

1. Describe the factors most responsible for your unsatisfactory academic performance? How did those factors affect your grades each term?
2. During the last quarter/semester you were enrolled, how many hours did you spend weekly on:  
Your studies? \_\_\_\_\_ Texting/Social Media? \_\_\_\_\_  
Employment? \_\_\_\_\_ Recreation? \_\_\_\_\_  
Social events? \_\_\_\_\_ Video Games? \_\_\_\_\_

What, if any, impact did this schedule have on your ability to be academically successful?

3. What have you been doing since the time of your dismissal? How has this affected your desire to return to college?
4. What is different now? What has changed in terms of circumstances or behaviors that will ensure that the factors that affected your performance are no longer relevant?
5. Describe in detail the plan of action you will follow to ensure that your grades will improve when you return to school.
6. What is your proposed major? List the course and grade point average requirements necessary to enter that major. Explain why you believe it is realistic that you will achieve these requirements.
7. List a tentative schedule of classes by course number and title that, if reinstated, you will take during your first two semesters of enrollment. Indicate any classes to be retaken because you previously earned Ds or Fs.

First Semester Back

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Second Semester Back

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Do you have a disciplinary record? If so, explain when, for what reason(s), and the disciplinary sanctions imposed. The Office of Community Standards and Student Responsibility (formerly University Judiciaries) may be contacted or you might be asked to provide verification.
9. Were/are you on disciplinary probation? If so, explain.
  - a. Were you suspended? If so, when did/does your suspension end?
10. List the three to five most compelling reasons you should be reinstated.
11. List two goals you expect to achieve within the next five to ten years. How does your current situation impact those goals? What short-term goals must you achieve in order to accomplish your long-term goals?
12. Please indicate an Ohio University faculty or staff person who would support your reinstatement. Athens campus students should include contact information. Regional campus students must include a letter of support from a student services advisor.

By signing and submitting this form, I am formally requesting reinstatement as an Ohio University student for the term noted above. I further understand that submission of this petition does not guarantee that I will be reinstated or that I will receive financial aid.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_