

West Texas A&M University
Request for Reinstatement after
Serving a Second Academic Suspension

(Student MUST also submit a Re-Entry application for admission)

Name: _____

Buff #: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Current Phone Number: _____

Email: _____

Major when suspended: _____

Major pursuing now: _____

1) In the upcoming semester:

how many total credit hours do you plan to take? _____

how many of those total hours do you plan to take online? _____

2) If reinstated, do you plan to work while attending college? _____

If you do plan to work, how many hours per week? _____

3) Will you be living:

_____ On campus _____ off campus in Canyon _____ commuting from _____ (where)

Please answer the following questions in complete sentences. Please type the answers or print very clearly. Attach your answers to the appeal form. You MUST attach all supporting documentation.

1). What factors contributed to your prior suspensions? Please be specific and address all semesters that led up to both the first and second suspension.

2). How have things been resolved so that you may be successful in the next semester?

3). In the period of time since you left WTAMU, what have you been doing both personally and professionally (work, education, family, etc.)?

4). What additional information do you want the Committee to consider in the review of the appeal?

5). Provide the Committee appropriate documentation about your circumstances (i.e. medical documentation, obituary, doctor note) and supporting documentation from campus resources you have utilized.

Return this form, your responses to the questions, and any documentation to: Office of the Registrar
WTAMU Box 60877
Canyon, TX 79016-0001
Fax 806-651-4949

If you prefer to submit an electronic copy, you may email it to the Registrar at dbrice@wtamu.edu

You MUST submit ALL necessary documentation by the deadline. Requests will not be reviewed if submitted after the deadline.

Please read and initial the following four statements and sign below:

- _____ 1. I consider this form, attached responses to the questions and any documentation provided, as my formal request to be reinstated after serving a second suspension.
- _____ 2. I understand that if I am unsuccessful in achieving at least a 2.0 minimum GPA in a semester that it will result in dismissal from West Texas A&M University.
- _____ 3. I state that all information and documentation provided is original, true, and correct to the best of my knowledge.
- _____ 4. I understand it is my responsibility to obtain any necessary medical, disability services, or other documentation. I also understand that if not attached, the committee may not consider my request.

Signature of Student

Date

For Official Use Only

Date received by the Registrar: _____

Documentation Included? Yes _____ No _____

Date of Appeal Hearing: _____

Appeal: Granted _____ Rejected _____