

**Application for Admission or Readmission After Suspension or Dismissal**

*Please complete Parts I & II, sign Part II, and return this form and any attachments to the office of the Dean for Student Services.*

**PART I (To be completed by Student)**

**TO: Admissions Committee**

FROM: Student Name: \_\_\_\_\_ SIS ID: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ Veterans Benefits: Yes  No

My academic status is:  Suspension  Dismissal since (Term/Year) \_\_\_\_\_ from  TCC  Other \_\_\_\_\_

Academic plan in which last enrolled: \_\_\_\_\_

I request readmission commencing: \_\_\_\_\_ (Term/Year) in the \_\_\_\_\_ Curriculum.

**PART II (To be completed by Student) (Continue on reverse if more space is required)**

**I request consideration for readmission to the College. The following is my description of:**

The circumstances that resulted in my current academic situation AND my plan for academic improvement:

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

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART III (Counselor's Notes and Recommendations)**

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

Counselor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART IV (Admissions Committee Action)**

Readmission:  Approved commencing: \_\_\_\_\_ (Term/Year)

Academic conditions which must be complied with: \_\_\_\_\_

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

Disapproved (Reason): \_\_\_\_\_

Committee Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Any modifications to these recommendations without approval of the Admissions Committee or failure to file the form in a timely manner will void your readmission.*