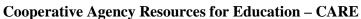
Hartnell College

Extended Opportunity Program and Services - EOPS





Petition for Reinstatement

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Please complete, sign and submit this form to the EOPS office no later than three weeks (21 days) from the date of your Disqualification notification. Your Petition for Reinstatement will be reviewed by the EOPS Appeals Committee. You will receive a notification of approval or denial within 20 business days. If your Petition for Reinstatement is approved, you will be reinstated to EOPS as an active member of the program. If your appeal is denied, you will be disqualified from the program.

Last Name:	First Name:	ID:					
Email:	Phone:	Units Completed:					
Current Semester:	Cumulative GPA:	Semester GPA:					
Why have you been disqualified from EOPS? [] Completed < 3 EOPS Contacts [] Enrolled < 6 Units [] < 2.0 GPA							
Have you been disqualified from EOPS before	ore?[]Yes[]No						
Are you a member of any other support program(s) on campus? [] Yes [] No							
If yes, which program(s):		?					
supporting documentation)		ntion from the EOPS program. (Please submit any					
2. Please explain what has changed, or the cleops program in the future.	hanges you plan to make, to e	nsure you will remain in good standing with the					
Student Signature		Date Signed					
OFFICE USE ONLY							
Recommendations:		Initials:					
Recommendations:		Initials:					
Recommendations:		Initials:					
Comments:							
Final Decision: [] Approved [] Denied		Date:					