



**EASTERN KENTUCKY UNIVERSITY**

Office of the Registrar: Whitlock CPO 58, 521 Lancaster Avenue, Richmond, KY 40475-3158  
Phone: (859) 622-1097 FAX: (859) 622-6599

**PETITION FOR READMISSION TO EKU**

- Students who have left EKU with an overall GPA of less than 1.5 must petition the Admission Appeals Committee for permission to return to EKU.
- Use this form to request readmission into EKU and/or an appeal for immediate return from developmental dismissal or academic suspension.
- *NOTE: Academic Dismissal (which is different from developmental dismissal) has a mandatory 5 year sit-out period which cannot be appealed.*

Name: \_\_\_\_\_  
PLEASE PRINT

EKU ID or SSN#: \_\_\_\_\_ Day phone: \_\_\_\_\_

Current mailing address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_  
*The Office of the Registrar will only send student record information to your secure EKU email address.*

*As a condition of your readmission the Committee may place specific academic stipulations on you during your first semester back at EKU. Your signature below indicates your agreement to abide by the conditions applied by the Committee.*

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

**Please complete the following:**

1. Indicate which status below applies to you. I am returning to EKU from:  
\_\_\_ACADEMIC SUSPENSION \_\_\_DEVELOPMENTAL DISMISSAL \_\_\_TIME AWAY

2. Last term at EKU: \_\_\_\_\_ Current cumulative GPA (grade point average): \_\_\_\_\_

3. Degree/Major desired: \_\_\_\_\_ Hrs. toward graduation: \_\_\_\_\_

4. If readmitted, indicate the semester and year you wish to re-enter EKU:  
\_\_\_FALL 20\_\_\_ \_\_\_SPRING 20\_\_\_ \_\_\_SUMMER 20\_\_\_

5. Have you attended any college since you were last enrolled at EKU? \_\_\_YES \_\_\_NO

*If YES, then official transcripts from these colleges **MUST be received** by EKU before the RAC is able to review your petition. List below the school(s) you attended while away from EKU.*

School(s)	Dates
_____	_____
_____	_____

*Form is continued on next page.*



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### NOTE:

- **Appropriate documentation to support this appeal is required before the Committee will review this petition: e.g. medical documentation including dates of illness and diagnosis; obituaries; testimonial or letter of support from an employer/counselor/commanding officer attesting to your intent, determination, reliability, maturity.**
- **An incomplete application will not be reviewed by the Committee and thus may prevent you from being considered for the term in which you have applied.**

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**Thoughtfully respond to EACH of the following questions, use additional paper as necessary.**

**The Committee will very carefully review your answers. How you respond may determine whether you are allowed to return to EKU!**

- A. Detail your previous poor academic performance and explain why you did not succeed at EKU.
- B. If you are allowed to return you will be expected to succeed – immediately – or you will be suspended/dismissed. EXACTLY what will you do to be more successful?
- C. Permission to stay at EKU depends upon your GPA. What actions do you intend to take to raise your GPA?
- D. If readmitted, for which courses do you plan to register? Why those courses? *(Note, as a condition of reinstatement you may be restricted in the number of credit hours you attempt, and you may be specifically instructed to take certain classes.)*
- E. Additional Information: Feel free to elaborate on any of your answers or to provide the committee with additional information you feel is important for us to have in order to give your petition full consideration.