

UNIVERSITY OF ILLINOIS
COLLEGE OF AGRICULTURAL, CONSUMER AND ENVIRONMENTAL SCIENCES
104 Mumford Hall/MC-710
1301 West Gregory Drive
Urbana, IL 61801
(217) 333-3380

PETITION TO RE-EVALUATE DROP STATUS

THIS PETITION CAN ONLY BE FILED BY STUDENTS WHO WERE PLACED ON DROP STATUS AT THE END OF THE PREVIOUS SEMESTER.

PROCEDURAL GUIDELINES

- 1) It is your responsibility to include any supporting documentation with this petition at the time of submission. Examples of this documentation include:
 - a) letter(s) of support from any medical professional(s) who(se) care you are or may have been under; and
 - b) a copy of a death certificate or funeral program to document a death of a family member or friend.
- 2) Prior to submission to the ACES Academic Programs office, this form must be submitted to your academic advisor for review, signature, and any comments she/he may wish to include.
- 3) Once completed this form and any supporting documentation should be submitted to the College of Agricultural, Consumer and Environmental Sciences' Academic Programs office (104 Mumford Hall).
- 4) Re-evaluation of drop status requests must be submitted by the following dates:

July 31 for Fall Semester;
Prior to the first day of classes for the Spring Semester; or
Prior to the first day of classes for the Summer Semester.

NAME _____ UIN _____
(LAST) (FIRST) (M.I.)

ADDRESS _____
(STREET) (CITY, STATE, ZIP)

PHONE NUMBER _____

E-MAIL _____

UIUC College of Last Enrollment _____ Program of Last Enrollment _____

Major and Concentration to which you are requesting re-entry _____

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DEAN'S REVIEW AND ACTION

(TYPE OR PRINT LEGIBLY)

RE-ENTRY APPROVED

Academic Program Code: _____

Academic Standing for Re-entry Term: _____

Expected Graduation Term: _____

Catalog Term (if re-entered from another major in ACES or non-ACES: _____

Correspondence Sent to Student Stating Conditions (copy attached): _____

Special Action Desired, i.e. place hold, do not allow to participate in early registration, etc.? _____

RE-ENTRY DENIED

Place hold on student: YES or NO

If yes, hold code and reason: _____

Drop any future registration if they exist: YES or NO

Correspondence sent to student: YES or NO
(copy attached)

DEAN'S SIGNATURE

DATE

FOR OFFICE USE ONLY

ACES Academic Programs Checklist

(please check off as complete, initial and date where appropriate)

COAR User Updates

SGASTDN or SFAREGS

SHAINST

SGASADD, only if from college other than ACES

SGAADV, only if from college other than ACES

SOAHOLD

SFARGRP

Routed to Log for recording decision and accurate filing

Records area notified of new student if re-entry program is in different department or student is new to ACES.

Completed ICT Information Included YES or NO or N/A
(if re-entered from a non-ACES program)