



Re-Admission after Suspension Petition

208.524.3000 ext. 4 phone – 208.525.7026 fax
1600 S 25th E – Idaho Falls, ID 83404 – www.cei.edu

Student shall submit this written petition requesting re-admission to CEI.

Student Information

Date _____ Student ID _____
Name _____ Phone _____
Address _____

Suspension Information

- Subject to fulfillment of conditions established by CEI, petition maybe granted, denied, or postponed.
- If re-admission granted enrollment will be probationary for one semester.
- Re-admission granted on a program space availability.

Requesting to enroll in the _____ program.

Term Suspended _____ Term Requesting to Return _____

Student must attach a statement including the following: Evidence, which shows a positive change of circumstances and suggests a high probability of future academic success.

Signature _____ Date _____

Office Use Only

Registrar will supply the following: Cumulative GPA _____ GPA last semester enrolled _____

Department Chair/Division Manager

Petition is: Recommended Not Recommended

Comment _____

Signature _____ Date _____

Dean CTE/GEN ED

Petition is: Recommended Not Recommended

Comment _____

Signature _____ Date _____

Dean of Student Affairs

Petition is: Recommended Not Recommended

Comment _____

Signature _____ Date _____

Forward to Registrar

End Suspension PERC _____ Date emailed: Faculty Advisor, AC, CND, DC/DM, FA, VA _____