



# LOSS of ENROLLMENT PRIORITY PETITION

**INSTRUCTIONS:** Complete and submit this petition with attached documentation to Admissions or any Higher Education Center. The approval for Enrollment Priorities will automatically apply for BOGFW Fee reinstatement, *if applicable see eligibility below.*

\_\_\_\_\_  
Name (Last)

\_\_\_\_\_  
(First)

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Semester

**SELECT ONE REASON BELOW AND ATTACH THE REQUESTED DOCUMENTS, SEE BACK FOR ADDITIONAL REQUIREMENTS**

## LOSS OF ENROLLMENT PRIORITY

☐ **EXTENUATING CIRCUMSTANCES**

Extenuating circumstances are verified cases of accidents, illnesses, financial difficulties or other circumstances beyond the control of the student. *Examples of required documentation include: Medical records, police reports, court documents, loss of financial income, etc.*

☐ **STUDENTS WITH DISABILITIES**

Students who had applied for academic accommodations and did not receive reasonable accommodations in a timely manner, or who are authorized for priority enrollment as a DSS authorized academic accommodation and are making progress towards their academic goal. *Required documentation include: Authorized Academic Accommodation Form*

☐ **STUDENTS WHO HAVE DEMONSTRATED SIGNIFICANT ACADEMIC IMPROVEMENT**

Students who are defined as achieving no less than the minimum grade point average and progress standards, and have improved in recent semesters.

☐ **STUDENTS WHO ARE ENROLLED IN HIGH UNIT MAJORS OR IN THE CATEGORIES LISTED BELOW**

Students who became ineligible due to accumulated units from Advanced Placement, 2+2, or Credit by Examination

☐ **HONOR STUDENTS**

Honors Students who have no other available opportunity for honor addendums, based on their academic goal. *Required documentation include: Honors addendum contracts for the completion of at least 15 semester units and Student Education Plan.*

☐ **FINAL SEMESTER BEFORE DEGREE CERTIFICATE AND/OR TRANSFER COMPLETION**

Student is within his/her final semester of degree, certificate and/or transfer completion. *Required documentation include: SEP confirming final semester and a list of classes to enroll for the following semester.*

**IF APPLICABLE, PARTICIPATING IN THE FOLLOWING PROGRAM:**

☐ CALWORKS   ☐ DSS   ☐ EOPS   ☐ VETERANS   ☐ OTHER \_\_\_\_\_

*By signing below, I declare under penalty of perjury that all information on this form is true and correct. I understand that this appeal will be void should I fail to make academic progress.*

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# LOSS OF ENROLLMENT PRIORITY PETITION PROCESSING INSTRUCTIONS/REQUIREMENTS

## Student Check List:

- ☐ I have read, completed, and signed the reverse side of the petition
- ☐ I have attached a typed narrative of situation regarding your loss of enrollment priorities or BOGFW
- ☐ I have attached a current or updated Student Educational Plan (SEP)
- ☐ I have attached documentation to support my request
- ☐ I understand that any **missing information will result in the Loss of Enrollment Priority/BOGFW Fee Petition being delayed or denied**

## Loss of Priority Registration:

Per Title 5, Section 58108 Regulations of the California Community College System, your calculated academic standing will impact your assigned registration date for future semesters. A second consecutive term (fall/spring semesters) on academic process probation will result in the loss of continuing student priority registration. This will also apply to any student over the 100-unit limit (excluding non-degree applicable and ESL courses). This means you would register after all continuing and new students, thereby possibly losing your opportunity for the courses you need to meet for your educational goal.

## Important Note:

Foster Youth and Former Foster Youth (up to age 24) are exempt from loss of both priority registration and/or BOGFW per regulation.

## FOR OFFICE USE ONLY

Petition and Documentation received by Staff person: \_\_\_\_\_ Date: \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ APPROVED ☐ DENIED ☐ NO ACTION Committee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

Results scanned/emailed to student: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION DATE CHANGED TO:** \_\_\_\_\_ ☐ FALL ☐ SPRING ☐ SUMMER YEAR: \_\_\_\_\_