



ADMISSIONS AND RECORDS

5055 SANTA TERESA BLVD GILROY CA 95020

Submit petitions to: **PRIORITYGROUP@GAVILAN.EDU**

Loss of Enrollment Priority Appeal Petition

Per Title 5, section 58108, you may submit this form for consideration if you have **lost your enrollment priority** due to not meeting the necessary academic requirements or because you have reached or exceeded the 100 unit maximum (excluding a maximum of 30 units of basic skills and/or ESL classes). You may also petition if you have an extenuating circumstance as described below. If you feel that you have met the requirements for an exception, please complete this form, attach the necessary documents, and submit it to the Admissions & Record Office. You will receive an email response indicating the outcome of your petition. Please note that, in order to receive priority registration for the next semester, your petition must be submitted and approved **at least 2 weeks before** the start of priority enrollment.

Name: _____ G#: _____
Last Name First Name Middle Initial

Email: _____ Major: _____ Phone #: _____

Semester/Year: _____ Current priority level: _____ Requesting consideration for level: _____

Please attach a personal statement explaining your situation – **1 page maximum**

Check which applies to you:

- ☐ 1. **Extenuating circumstance (Title 5, 55045, 58161) that resulted in a Probation 2 or Dismissal status** – Approval is based on evidence of unavoidable extenuating circumstances beyond your control, such as a death in the family, serious accident, hospitalization, etc. To be considered, **you must provide documentation**, which may include such items as medical documents, death certificate, funeral program, etc.
- ☐ 2. **I have demonstrated significant academic and/or progress improvement** – Attach evidence (transcripts) indicating that, since you lost priority registration, you have successfully completed a minimum of 2 semesters with a 2.0 GPA and completed all of the units attempted. The coursework may be from Gavilan College or another regionally accredited college/university.
- ☐ 3. **I am enrolled in a high unit program (Title 5, 58108)**– Program designated as high unit programs such as nursing. See your counselor for more information. Attach a copy of your current Education Plan. *Schedule an appointment with a Gavilan College counselor to develop a plan and to review your extension request. An appointment is required, no exceptions. You may schedule an appointment online (www.gavilan.edu/counseling). Appointments are not available January, June, July, or August. Plan ahead.* Counselors may submit petition on student's behalf – Student's signature not necessary.
- ☐ 4. **I have a disability and applied for services but did not receive a timely, reasonable accommodation (Title 5, 56006, 56027)** please attach a typed written statement of your situation and any documentation to substantiate your petition. A letter from the Disability Resource Center on campus is required.
- ☐ 5. **This is my final semester at Gavilan College.** I will complete the stated goal on my approved Education Plan (certificate, AA/AS degree, or transfer for first Baccalaureate program). Please attach education plan.

I understand that approval of this petition allows me to retain my current registration standing for two semesters, beginning with the semester indicated above. I also understand that this is a one-time exception. There is no guarantee that this petition will be approved and, if approved, does not guarantee enrollment in any class. I acknowledge that all committee decisions are final and are not subject to further appeal. *I also understand that by submitting this petition all transfer units will be posted to my Gavilan transcripts, which may affect my eligibility for financial aid.*

Student's Signature

Date

Counselor's Signature

Date

OFFICE USE ONLY

- ☐ Form not necessary ☐ Denied
☐ Returned for documentation ☐ Approved

A&R Director

Date