Process for Submitting College of Graduate Studies (COGS)
Re-enrollment Petitions

1. Read and complete the petition form on the following page. Carefully follow the instructions.

2. **YOUR ADVISOR or MAJOR PROFESSOR’S SIGNATURE IS REQUIRED ON THE PETITION.**

3. A letter/statement from you is required. In the letter/statement explain why you wish to re-enroll and discuss the reason you were not continuously enrolled in your program. Please note in your letter/statement the term in which you wish to re-enroll. Please include a timeline of when you plan to finish your degree.

4. A letter or statement of support from your advisor is required. If your advisor is not available then a letter or statement from the department head is required.

5. A study plan (current or updated) is required as part of the petition.

6. $10 Petitions Fee is required. Please pay this fee at Student Accounts in the Pitman Center in-person, or over the phone at (208) 885-7447. Attach proof of payment to the petition.

7. Your petition can be emailed to uigrad@uidaho.edu, faxed to 208-885-6198 or delivered to Morrill Hall room 104.

8. Please call CoGS at (208) 885 – 2647 with any questions.

Your petition will be presented at the next scheduled College of Graduate Studies petitions meeting. An email will be sent to you with the committee’s decision.
College of Graduate Studies Re-enrollment Petition

Directions: Please complete the information below and return this form and all supporting documents to the College of Graduate Studies in Morrill Hall 104, or to uigrad@uidaho.edu or by fax to 208-885-6198

Student Name: ________________________________________________________________

ID #: ___________________________ Degree: ___________ Major: _______________________

Email: ____________________________________ Phone Number: _______________________

Petition Request:
Reenrollment after more than a 12 month absence.

Required Materials:
• Statement from Student
• Statement from major Professor or department chair

X ________________________________ ________________
Student Signature Date

X ________________________________ (check one) _____ approve the petition for submission only
Major Professor/Dept. Chair Signature Required _______ support this request

Comments:

At a meeting of the Graduate Petitions Committee, the above petition was:

_____ Approved _____ Denied

Dean, College of Graduate Studies _______________________________ Date ________________________

Revised 7/10/2017