

OKLAHOMA CITY COMMUNITY COLLEGE

SUSPENSION READMISSION FORM

Student ID #	First Name	MI	Last Name	
Address		City	State	Zip
Home Phone Number		Cell Phone Number		

Official College Transcripts from all Institutions received.

Student Contracted for any documents not received.

Semester Suspended _____ Returning Semester _____

I understand that I am being readmitted on a status of Academic Probation while my retention/cumulative GPA remains below a 2.0. _____ (Student Initials)

I understand that if I do not achieve a 2.0 semester GPA while I am on probationary status that I will be placed on 2nd suspension. _____ (Student Initials)

I understand that if I am suspended a second time at OCCC, I will be required to attend another institution until I have completed enough credits to bring my retention/cumulative GPA to a 2.0. _____ (Student Initials)

I certify that all information given here is complete and correct to the best of my knowledge. I understand that failure to provide transcripts from all previous attended colleges will result in a document hold being placed on my student account.

Student's Signature: _____ Date: _____

Office Use Only

Processed By:	Date:	SACS Code
<input type="checkbox"/> STAC <input type="checkbox"/> STAL <input type="checkbox"/> SACS	<input type="checkbox"/> SPRO <input type="checkbox"/> CRI <input type="checkbox"/> SCAN	