



FRESH START PETITION

Registrar's Office ■ 80 Vandenburg Ave, Troy, NY 12180 ■ www.hvcc.edu

Instructions: Please review the Fresh Start Policy Statement prior to completing this petition. If you meet requirements, please complete the petition with your academic advisor or department chair. The completed petition must be submitted to the Registrar's Office by the published withdrawal deadline in the student's term of re-enrollment to the college. The form may be submitted to registrar@hvcc.edu from your HVCC student e-mail address, via postal mail to the address above or in-person with picture ID.

Student Information:

Name _____ ID#: H00 _____

Address _____
Street _____ City _____ State _____ Zip _____

Current Semester: Year _____ Fall Spring Summer Intersession

Previous Semester: Year _____ Fall Spring Summer Intersession

Current Program _____

Briefly explain circumstances in past semester(s) and your current level of preparation for academic success.

(attach additional sheets if necessary)

By entering my name below, I certify that the information contained on this petition is true and complete to the best of my knowledge. I have read and understand the information contained in the Fresh Start Policy Statement and will meet with a financial aid counselor if necessary.

Student Name _____ Date _____

Department Chair/Advisor Comments:

Advisor/Department Chair Name _____ Date _____

Office use only:

Date received _____

Initials _____

Fresh Start granted? yes no

Date transcribed: _____

Initials _____

Did not meet eligibility criteria:

- not registered
- not absent for two years
- only registered in remedial coursework
- other _____

Did not meet completion criteria:

- received F, Z, I, W, AW or remedial equivalent
- did not earn 2.00
- other _____