



Application for Readmission After Academic Suspension

Academic Review Board Chair, Registrar Office, PO Box 67, Hiram, OH 44234

Phone: 330.569.5210 · Fax: 330.569.5211

Teachout-Price, Student Services Suite

Registrar@Hiram.edu

Please carefully review the [Readmission Procedures for Suspended Students](#) for complete information, required documentation, and application deadlines before proceeding with the application. Your application will be reviewed by the Academic Review Board (ARB) which will either accept or deny your readmission to the College.

Hiram College reserves the right to deny readmission to any student for reasons including but not limited to outstanding financial obligations, academic deficiencies, college disciplinary actions, or convictions of criminal activity. Students will be informed by phone and by mail about the College's readmission decision. Students can appeal a denial of readmission through the Enrollment Management Committee. Appeals must be made in writing within three business days of received denial and submitted to Registrar, Hiram College Registrar's Office, PO Box 67, Hiram, OH 44234.

Readmission to Hiram College does not guarantee readmission to the Nursing program. Please contact the Nursing Department for further information.

In order to be readmitted, you must provide convincing evidence to the **Academic Review Board** that conditions leading to your Suspension have been dealt with and that you now will be able to meet the academic standards of the college.

Please submit the following to Academic Review Board Chair, Registrar Office, PO Box 67, Hiram, OH 44234:

1. This completed **Application for Readmission**.
2. A carefully composed, typed, **personal statement** explaining why you should be readmitted to the College, including a description of the factors that will help to guarantee your future academic success.
3. **Two or more letters of recommendation** indicating the progress you have made during the period of Suspension. At least one of these letters should be from an academic professional (faculty or counselor) who was familiar with you before the Suspension and who has maintained contact with you during the period of Suspension.
4. **Transcripts or grade reports** of any graded courses taken at another college or university during the period of Suspension. Such courses are not required, but they are very strongly recommended. They often can supply evidence that you are capable of doing well in significant college-level work. If you are unable to take courses, the reason for this should be explained in your personal statement (in #2 above).
5. **Re-admission Waiver(s)** if you have taken classes at another college or university. This form is available online at www.hiram.edu/registrar.
6. A **personal interview** with an ARB member. You must contact the board by e-mailing arb@hiram.edu by the deadline noted in [Readmission Procedures](#) to set up this interview.

NOTE for Traditional Students: A **readmission fee** of \$100 and \$100 housing deposit (if applicable) is required. It is best to make this payment as soon as possible to expedite the approval process. Payment can be made online at www.hiram.edu/deposit, send to PO Box 1808 Hiram, OH 44234, or in person in the Office of Student Accounts. If readmission is denied, the deposit(s) will be refunded.

NOTE for Center for Adult Studies Students: If ARB approves your readmission, additional approval is required from several campus offices. Please contact CAS for more information.

Please provide all of the following:

Name: _____
(First name) (Middle Name) (Last Name)

Mailing Address: _____
(Street) (City) (State) (Zip code)

Mailing Address Phone: _____ Cell Phone: _____

Citizenship: _____ Current Email: _____

Returning as (check one): Traditional Student Center for Adult Studies Student

School(s) Attended Since Leaving Hiram: _____

Intended Major(s) _____ Minor (If any) _____

Advisor Choice: _____

Do you intend to apply for housing? (Traditional Students only) Yes _____ No _____

Employment since leaving Hiram (Names, Places, Dates): _____

I certify that to the best of my knowledge that the information given in this application is true. I understand that any omission or misrepresentation of facts will be cause for denial of readmission or dismissal from Hiram College if later discovered. I understand that the references and previous academic institutions listed may be contacted. I further understand that it is my responsibility to arrange for all official transcripts to be forwarded directly from the issuing institution to be received by the Registrar's Office at Hiram College.

Student Signature _____ Date _____

Please note: You must also be approved by the offices below in order to be fully readmitted to Hiram College. This process will be facilitated by the Registrar's Office.

*****FOR REGISTRAR OFFICE USE ONLY*****

Readmission Application _____ Personal Statement _____ References _____
Official Transcript _____ Readmission Waiver _____ Personal Interview _____
Deposit(s) _____ ARB Decision _____ Email notification to below offices sent: _____

	Approved by:	Have Concerns:	Date:
Business Office:	_____	_____	_____
Rate Code:	_____	_____	_____
Deans of Students' Office:	_____	_____	_____
Financial Aid:	_____	_____	_____
Collections:	_____	_____	_____
Associate Dean of the College:	_____	_____	_____
Athletic Director (if applicable):	_____	_____	_____

Readmit letter sent _____ Banner updated _____ Campus notification: _____