



GRADUATE STUDENT REINSTATEMENT PETITION

APPLICATION FOR REINSTATEMENT – (Graduate Students Only)

Applicant Information

Applicant Name:

Last, First, M.I.

Date

Student ID: @

Email Address:

Address:

Street Address (Including Apt./Suite)

Phone Number

Degree:

Major:

Credit Hours Earned:

Current Overall GPA:

Semester of Academic Suspension:

Requested Readmission Semester:

Review requests must include a completed and signed application along with a supporting narrative that describes: a) the nature of the review request, b) course of events that led to the review request, and 3) course of action that is being sought.

Applications for reinstatement must be submitted in writing to the Associate Dean for Academic Programs and Student Affairs.

Student's Signature

Date

Please insert narrative in the space provided below. If more space is needed, please attach documents.

APPLICATION FOR REINSTATEMENT – (Official University Use Only)

Recommendation Academic Standards Committee

Recommended Action (check one): **Approve** **Deny**

Recommended Semester of Reinstatement (if approved):

Signature - Academic Standards Committee Chair

Date

Recommendation Dean or designee (School of Education)

Recommended Action (check one): **Approve** **Deny**

Recommended Semester of Reinstatement (if approved):

Signature - School of Education Dean

Date

***Recommendation Dean or designee (Graduate School)**

Recommended Action (check one): **Approve** **Deny**

Recommended Semester of Reinstatement (if approved):

Signature – Graduate School Dean

Date

*Required for students enrolled in programs offered through the Graduate School (e.g. M.A., M.S., or Ph.D.)