Petition for Reinstatement

Students who are academically dismissed are not permitted to re-enroll at the university until one full semester (fall or spring) has elapsed after the date of dismissal. At the conclusion of one full semester of dismissal, the student may petition for reinstatement to the dean of the student's college. Each petition will be considered on its own merit. Reinstatement is not automatic.

			Date				
Full name of student			Phone				
Address to which response letter should be	mailed						
Student ID#	Birthdate	Email Address					
Check term for which you wish to be reinst	tated:	☐ Fall	☐ Spring	☐ Summer			
Check the area of your intended major:	☐ Arts and Sciences	☐ Business		Undeclared			
	☐ Education	☐ Technology		General Studies			
Directions to the Student: Complete this sheet and <i>return to approp</i> Hall; Business, 101 Kelce; Education 115 113 Axe Library. Your previous advisor's you have attended since last enrolled at PS	Hughes Hall; Technology, s input is required (see second	S101 KTC; or you may select	ct: General Studie	s, 113F Axe Library; Undeclared,			
I wish to have my petition for reinstatemen	t given careful consideratio	on for the following reasons:	(a separate page	e may be attached if desired)			
Reason for previous academic difficulty:							
How do your current circumstances differ the state of the							
List any courses taken since your dismissal	from Pittsburg State:						
Course Number Co	ourse	Grade Date T	aken	Institution			
	Your last enrollment at Pi	ttsburg State University (sem	ester and year):				

Faculty Advisor's Statement Concerning Petition for Reinstatement

(The student should complete lines 1-6 before sending or giving the form to his/her advisor)

1. Full name					
2. Check term	for which you	wish to be reinstated:	☐ Fall	Spring	Summer
3. Degree you	are seeking:		Major:	_	<u> </u>
4. Name of fac	culty advisor:_				
5. Last semeste	er of attendanc	ee at PSU:	(semester and year)		
6. Activities si	ince last attend	ling PSU:			
		lent named above is asked to gi			
the advisor is no return this sheet	ot on campus, to your Dean o	or not available, another facult or Director).	y member or the chairperson	of the department may b	e substituted. (Advisors please
Totalii tilis silott	to your Boarr	<i>31 Bileetol).</i>			
This student	□ is	is not recommended for	reinstatement.		
	Ц	—			
I have the follow	ing comments	and observations to make about	the above-named student:		
Date				Fac	ulty Advisor's Signature
This student	is	is not recommended for	reinstatement. (Retain a copy	for your records and send	l form to Registrar's)
Comments (option	nna1)				
comments (optic	onar)				
		-			
Date				Dean's	Signature