

Student ID#: \_\_\_\_\_

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Last First Middle

Instructor's Name: \_\_\_\_\_

Schedule #: \_\_\_\_\_ Course Name: \_\_\_\_\_ Term: \_\_\_\_\_

**INSTRUCTOR:** The above named student was dropped from your class. He or She is requesting reinstatement. If you wish the student to be reinstated, please complete the following three questions, sign and date the form, and return it to the Admissions and Records office.

1. **REASON FOR DROP:** Instructor Error \_\_\_\_\_ Discipline \_\_\_\_\_  
Illness \_\_\_\_\_ Failing \_\_\_\_\_ Excessive Absence \_\_\_\_\_ Other \_\_\_\_\_

2. **DATE OF DROP:** \_\_\_\_\_

3. **CONDITION FOR REINSTATEMENT:**

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Student: \_\_\_\_\_ Date: \_\_\_\_\_  
(Only when petition initiated by student)

Instructor: \_\_\_\_\_ Date: \_\_\_\_\_ Approve \_\_\_\_\_ Disapprove \_\_\_\_\_

### Note to Students Receiving Financial Assistance

Those students attending school and receiving financial assistance, including Veteran's subsistence, should be aware that in the event a drop has been turned in and a subsequent reinstatement approved, their subsistence payments may have been reduced during that time period.

Processed by: \_\_\_\_\_ Processed Date: \_\_\_\_\_