

## Petition for Reinstatement to Class Roll After Being Dropped for Non-Payment

<b>Student ID No:</b>	<b>Semester &amp; Year:</b>
<b>Student's Name:</b>	<b>Phone Number:</b>
<b>Email:</b>	

### NOTES TO STUDENT:

Students who have been dropped for **NON-PAYMENT** may petition for reinstatement to classes by completing the steps listed below.

1. The deadline for seeking reinstatement for nonpayment the **Spring 2021** Semester will be **Friday, March 12, 2021**.
2. Visit the Registrar's Office with the course information completed to obtain reinstatement into your class schedule
3. Take the completed petition with Registrar's Office signature to the Financial Aid Office if you are receiving federal aid to pay for classes. (If not receiving financial aid, skip to step 4)
4. Take to Cashier's/Bursar's Office to make the required payment.

### COURSE INFORMATION

Please complete all information below for each class for which you are seeking reinstatement. You are not allowed to add any new courses. You will only be reinstated into courses that were previously on your academic schedule.

SUBJECT	COURSE NUMBER	SECTION	CRN	CREDIT HOURS	INSTRUCTOR
<b>Ex: SENL</b>	<b>101B</b>	<b>01</b>	<b>12345</b>	<b>3</b>	<b>Dr. Smith</b>

**Read Carefully:**  
 By signing this form you are consenting to classes being reinstated to your academic schedule. Please be advised that once classes are reinstated tuition and fees will be assessed accordingly and charges will be applied to your student account. By requesting to reinstate, you are agreeing to the charges and agreeing to pay the tuition and fees associated with the courses.

\_\_\_\_\_  
 Student's Signature Date

All courses have been reviewed in student's registration history and reinstated. Tuition and fees have been assessed accordingly.

\_\_\_\_\_  
 Registrar's Office Signature Date

<b>FINANCIAL AID OFFICE: Financial Aid Covers Hours Added</b>		<b>Yes</b>	<b>No</b>
Recommendation:	Approval <input type="checkbox"/>	/	Disapproval <input type="checkbox"/>
Comments:			
_____ Financial Aid Representative Signature			Date
<b>CASHIER'S/BURSAR'S OFFICE: Required Tuition/Fees Paid</b>		<b>Yes</b>	<b>No</b>
Recommendation:	Approval <input type="checkbox"/>	/	Disapproval <input type="checkbox"/>
Comments:			
_____ Bursar's Office Signature			Date

**\*\*This form should be returned to the Registrar's Office once all signatures are obtained.\*\***