

APPLICATION FOR REINSTATEMENT AFTER CANCELLATION

Name: _____ Student ID# _____

Current Phone Number: _____ Term: Fall ____ Spring ____ Summer ____ Year ____

To be reinstated students must follow the following steps in the order listed:

1. Student retrieves this form from the Registrar's Office AND a copy of their previous class schedule.
2. Student meets with Student Accounts to determine payment amount. *Fees/refunds are calculated from the start date of the term. No special fee adjustments for cancellation/reinstatement. Late & reinstatement fees apply.*
3. Student obtains faculty OR division chair signatures for each course seeking to be re-enrolled below. *Students must re-enroll in the same number of credits from which they were canceled OR at the same enrollment status.*
4. Student brings this form to Student Accounts and submits payment in full to Student Accounts.
5. The student then submits this **completed** form WITH all required signatures, their previous class schedule, and Student Accounts approval to the Registrar's Office for processing.
6. The Registrar's Office re-enrolls the student in the courses listed below and notifies the student of their reinstated status via WarriorMail.

DEADLINE for students to be allowed to re-enroll is within 5 class days of classes being canceled for Fall, Spring, or Summer semester classes.

Dept.	Course Number	Section Number	Course Title	Cr.	Faculty Signature	OR	Division Chair Signature

As a student being reinstated after cancellation, I understand if my classes are canceled for non-payment again, I WILL NOT be eligible for reinstatement within the same semester.

Student's Signature _____ **Date** _____

For Office Use Only: Status of Enrollment: FT PT Credits _____
 Student Accounts Approval to Enroll: _____ Date: _____