

The Graduate School

## **Notice of Reinstatement to Graduate Standing**

Any student who is discontinued due to a lapse in enrollment must submit a Notice of Reinstatement to Graduate Standing form with department approval. **A \$60 fee will be placed on the student's account to be readmitted to their graduate program**. The Notice of Reinstatement to Graduate Standing form must be received by the Graduate School no later than the last day of enrollment for the semester the reinstatement is to begin.

1. Name:			
Last	First	Middle	Former
2. NSHE ID:	3. Date Last Attended:		
4. Graduate Program:	5. Degree Sought:		6. Sub plan (if applicable):
7. Requested semester for reinstatement	t:	_	- NS
8. Mailing Address:	•	<i>Q</i> :	
Number and Street	A	p No. City	State Zip Code
9. E-mail address:	10	. Phone Number:	
11. Change (if any) in Emergency Contac	ct:		
Name:	So,	XO	
Last	First	Relationship	Phone Number
GRADUATE PROGRAM	NS MAY (SUBJECT	TO GRADUATE S	CHOOL APPROVAL)
PLEASE SELECT ONE OF THE OPTIONS BEL	OW OR THIS FORM WILL B	E RETURNED TO YOUR DEF	PARTMENT FOR CLARIFICATION
Reinstate the student to gradua		their prior admissi	on
Require student to reapply for adm	OR mission to program		
Signature: Graduate Program Director	Date		ean of Graduate School
I certify the information provided	on this application	n is accurate.	
Student's Signature			Date
The Graduate School will se	end confirmation	of reinstatement	to student and program
For office use only			
Approved			
Denied Evaluator			Date