## W UNIVERSITY of WASHINGTON | TACOMA

## Petition for Reinstatement

OFFICE OF REGISTRAR, BOX 358400 • 253-692-4913 • FAX 253-692-4414

Reinstatement to the University of Washington Tacoma requires approval of the student's academic program or in the case of pre-major students, the Reinstatement Committee. Students who have been dropped from UW Tacoma for low scholarship will be required to sit out one quarter unless an exception is made by the reviewing body. Students who are reinstated continue to be on academic probation.

To be considered, the reinstatement petition must be submitted three weeks prior to the start of the quarter, and include:

- 1. A typed personal statement detailing circumstances that contributed to your low scholarship, what has changed that will ensure that your academic performance will improve, and any other factors that you feel are important.
- 2. Transcripts or grade reports of any coursework taken elsewhere since last attending UW Tacoma.
- 3. An advisor's signature on this form. Note: Signature does not imply petition approval.

A Returning Student application for readmission must also be filed online if a student was not in attendance at UW Tacoma during the previous two quarters not including summer term. A non-refundable \$60 application fee is required. The readmission application may be filed prior to a reinstatement decision if the admission deadline is approaching.

Name (Last)		(First)		(Middle)		
Address				(Apt.)		
(City)		(State)	(ZIP)			
Student Number	Daytime Phone ()		E-mail Address		@uv	v.edu
Last quarter attended at UW Tacoma: Quarter Year		Qua	arter requesting reinstatement		Quarter	Year
Academic Program:						
List all colleges attended sinc must submit official transcripts f			W Tacoma, including dates	of attendance. F	Please note 1	that you
Decisions regarding reinstatement for pre-major students are the responsibility of the Reinstatement Committee; reinstatement of students with a declared major is decided by the academic program. All information will be kept confidential and provided only to the reinstatement commit- tee or the academic program. The Registrar's Office will provide notification to the student of the reinstatement decision.						
Student signature				Date		
Advisor signature				Date		
FOR OFFICE USE ONLY						
Reinstatement: Granted	Deferred Denied Efff	ective (quarter	/year): Registra	r's Initials:	Da	ate:
Program or Committee signature	e:	D	ate: 🗆 Stude	ent notified	_ 🗆 SDB u	pdated