Request to be Reinstated to Active Status



1137 Pearson Hall, (515) 294-4531

For students who do not have active graduate status. Please fill out sections I and II **BEFORE** seeking program signatures in section III.

| | I. STUDENT INFORM | ATION: | | | | |
|------------------------|---|-------------------------------------|-----------------------------------|----------------------------|----------------|----------|
| | Student Name: | | | | | |
| | Current Address: (Street, City, State, Zip) | (Last) | (First) eMail: | | (ISU ID#) | |
| | Current Department: | | Major: | | | |
| | Degree: | | Term: | Year: | | |
| | Student's Signature: | | | Date | ə : | |
| | II. INFORMATION: | | | | | |
| | Over-age classes: Classes of Consult with your major profiles. Briefly recount your activities | essor about any classes that | t are or may become over-ag | ge before you complete you | ır degree prog | |
| | Have you ever been charged wireducational institution? | th or subject to disciplinary actio | on for scholastic or other type c | of misconduct at any | Yes | No |
| | Have you, since you were last e in probation, community service | • | | | Yes | No |
| | If the answer to either question | is yes, please explain: | | | | |
| | Will you be taking classes on ca | mpus or distance education? | | Cam | npus | Distance |
| III. PROGRAM APPROVAL: | | | | | | |
| | he above student has been Approved Denied by the Department: | | | | | |
| | in the Major: | | for the De | egree: | | |
| | Effective Term: Year: On a Full Provisional Restricted statu | | | | | |
| | having examined his/her undergraduate transcript, graduate record at Iowa State University, and the above con | | | | | |
| | DOGE Signature: | | | Date | э: | |
| | IV. GRADUATE COLL | EGE RESPONSE: | | | | |
| | Reinstatement to degree st Reinstatement to nondegree | | | | | |
| | Graduate College Signatur | e: | | Date | 9 : | |
| | Copy: Student | DOGE 1 Dept 1 | DOGE 2 Dep | pt 2 | | |

