Return to:
Office of the Registrar
Oregon State University, B102 Kerr Administration Building, Corvallis, OR 97331-2130
T 541-737-4331 | **F** 541-737-8123 | registrars@oregonstate.edu | http://oregonstate.edu/registrar

Request for Reinstatement

Reinstatement Policy as Stated in the Academic Regulations: *Students academically suspended from the university will be considered for reinstatement to the university after two years or after completion of a minimum of 24 quarter credits of transferable college level work at an accredited college or university with a GPA of 2.5 or above.*

Deadline: Reinstatement applications must be submitted to the Office of the Registrar two weeks prior to the term reinstatement is requested. If your reinstatement depends on transfer work from the term preceding, you may submit your application and transcripts no later than the first day of the term reinstatement is requested.

****

Name: _____ OSU ID #: _____
Last *First* *Middle Initial*

Current mailing address: _____

City/State/Zip: _____

Email: _____ Telephone: _____

1) I was suspended at the end of: Term: _____ Year: _____
2) I wish to be reinstated for: Term: _____ Year: _____
3) I was registered in the College of: Select college from list
4) Upon reinstatement, I wish to be registered in the College of: Select college from list
   a) To be reinstated to a different college you must fill out and include a *Change of Undergraduate Academic Program form.*
   b) **Please note:** certain OSU colleges and/or majors have minimum GPA requirements. As a result, some students may not be eligible to be reinstated to their chosen major. In this circumstance, students will be advised of alternative options and strategies they can pursue at OSU while working to improve their GPA.
5) **Official transcripts are required**. List in chronological order ALL colleges attended since leaving Oregon State University, including extension and correspondence courses. (*Use additional paper if necessary*.)

Name of Institution	Location	Dates attended (mm/yyyy)	Degree
_____	_____	From _____ To _____	
_____	_____	From _____ To _____	
_____	_____	From _____ To _____	

6) In the last seven years, are there any schools where you have been deemed ineligible to return?

☐ NO ☐ YES – Please state where and explain why (*attach additional sheets if necessary*): _____

_____

_____

7) **To determine residency status:** Please list in chronological order where you have been and what you have done since last attending OSU. (*Use additional paper if necessary*.)

Dates (mm/yyyy)	Location (*City & State*)	Activity (*work, school, etc.*)
From _____ To _____		
From _____ To _____		
From _____ To _____		

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Request for Reinstatement (Continued)

8) I **understand** that if I am reinstated, I will be on Academic Probation, and that if I have a term GPA below a 2.0 while I am on Academic Probation, I will again be suspended from the university.

9) I **have** complied with the reinstatement regulations. (*Please check the appropriate choice below*.)

   a) _ _ I have been absent from Oregon State University for 2 or more years.

   b) _ _ I have completed a minimum of 24 quarter **transferable** credits with a GPA of 2.5 or above.

Student Signature: _____ Date: _____

Please note that there is a $50 processing fee for reinstatements.

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To be filled out by the College Head Advisor:

The above named student is accepted by the College of _____

to pursue the major of: _____

_____	_____	_____
Head Advisor Signature	*Print Name*	*Date*

For office use only:
Vlt# _____Lev ____Camp_____Col_____Degr_____Type ____Res_____Majr_____Mnr _____Opt_____Adm Dec _____