

APPLICATION FOR REINSTATEMENT

DEADLINES FOR REINSTATEMENT:	FALL SEMESTER	-	JUNE 30
	SPRING SEMESTER	-	NOVEMBER 30

TODAY'S DATE _____

NAME _____ S.S.N. _____ / _____ / _____

CLASSIFICATION _____ SEMESTER LAST ATTENDED _____

EXPECTED DATE OF RETURN _____

ADDRESS WHERE YOU MAY BE REACHED:

(Street Address)

(City, State Zip Code)

(_____) _____
(Telephone No.)

REASON FOR YOUR ABSENCES FROM SPELMAN:

FINANCIAL MEDICAL PERSONAL
 ACADEMIC DISMISSAL OTHER _____

WERE YOU GRANTED PERMISSION TO ATTEND ANOTHER COLLEGE DURING YOUR ABSENCE?

YES _____ NO _____

lege you attended

IF YES, THE REGISTRAR'S OFFICE WILL NEED AN OFFICIAL COPY OF YOUR ACADEMIC TRANSCRIPT AS WELL AS, A COPY OF YOUR FINANCIAL AID TRANSCRIPT WHETHER OR NOT YOU RECEIVED FINANCIAL AID FROM THAT SCHOOL.

TO BE COMPLETED BY THE OFFICE OF THE REGISTRAR

BALANCE \$ _____ GPA _____

Approved []

Not Approved []