

Application for Reinstatement in Undergraduate Study



Undergraduate Advising and Research
Sweet Hall, 1st Floor
Stanford University
Stanford, CA 94305-3085
(650) 723-2426
(650) 725-1436 (fax)
vpue-advising@stanford.edu

Purpose:

An *Application for Reinstatement in Undergraduate Study* form must be submitted by a student who wishes to return after two (2) or more years away, unless away for Suspension. A student working with the Office of Accessible Education (OAE) may need a signature and documentation from that office.

Petition Deadline:

Four weeks prior to the beginning of the quarter of intended enrollment.

Please note: Submissions after the deadline may affect the date of enrollment.

Instructions:

1. Contact UAR to make an in-person or phone appointment with a UAR advisor.
2. Contact intended major department to announce plans for return, request review of the record and itemized list of remaining requirements. (Responses should be sent cc: vpue-advising@stanford.edu.)
3. Draft a Personal Statement (approx. 1-2 pages) describing time spent at Stanford; address, where appropriate:
 - Plans upon entering Stanford;
 - Behaviors that were successful and behaviors that were unsuccessful;
 - Any factors/events that prevented you from completing minimum requirements;
 - Activities (e.g. work, courses, volunteer service) since leaving;
 - Changes made which will translate to academic/personal success upon your return;
 - Resources at Stanford to be used upon your return to ensure your success;
 - Detailed immediate and longer-term academic plans upon your return;
 - Plans for completing any missing/unreported (i.e., I, *, L, and N) grades.
4. Meet with the UAR advisor to discuss your request and written statement.
5. Request transcripts for any work completed at all educational institutions since last enrolled at Stanford.
6. Obtain signature(s) and submit form and Personal Statement to:
 - Undergraduate Advising and Research
 - Attn.: Academic Standing
 - Sweet Hall, 1st Floor
 - Stanford University
 - Stanford, CA 94305-3085
 - Phone: (650) 723-2426
 - Fax: (650) 725-1436
 - E-mail: vpue-advising@stanford.edu

Notification:

You will be sent written notification of the results of your *Application for Reinstatement in Undergraduate Study* once it has been reviewed by the Subcommittee on Academic Standing or its designees. In general, petitions take three weeks to review. Notification will be sent to your mailing and/or e-mail address entered on this form. Failure to complete any, or part, of the requested information will delay the review of your request. Unsigned petitions (either by you or the UAR advisor) will not be reviewed. Petitions submitted after the deadline may not be reviewed.

Applications for reinstatement are subject to the approval of the Faculty Senate Subcommittee on Academic Standing or its designees. The Subcommittee or its designees may determine whether the application for reinstatement will be approved and the conditions that the student must meet in order to be reinstated. Reinstatement decisions may be based on the applicant's status when last enrolled, activities while away from campus, the length of the absence, the perceived potential for successful completion of the program, as well as any factors or considerations regarded as relevant by the Subcommittee.

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Please complete the information below in print or type. Read carefully the instructions on the reverse of this sheet. Attach typed statement to this form. Submit completed form and Personal Statement to: Undergraduate Advising and Research, Attn.: Academic Standing, Sweet Hall, 1st Floor, Stanford, CA 94305-3085. Phone: (650) 723-2426; fax: (650) 725-1436; email: vpue-advising@stanford.edu.

Mr. / Ms. _____
 Printed Name of Student (Last) (First) (Middle) Stanford ID Number

Name under which previously enrolled at Stanford Other name(s), if any, on any educational records Date of Birth (mm/dd/yyyy)

Classification (Fr., So., Jr., Sr.) Graduation Year Major Second Major (if applicable) Academic/Departmental/Major Advisor(s)

MAILING Address _____

HOME Address _____

Phone Number _____ Email Address _____

Residence Dean with whom you have worked (if applicable) UAR Advisor with whom you have worked

Quarter/Year last enrolled: Autumn Winter Spring Summer Academic Year _____
 Quarter/Year in which you wish to re-enroll: Autumn Winter Spring Summer Academic Year _____
 Quarter/Year of anticipated degree conferral: Autumn Winter Spring Summer Academic Year _____

List educational institutions attended since last enrollment at Stanford _____

If you are a non-U.S. citizen, indicate your U.S. visa category:

Student (F1) Exchange Visitor (J1) Permanent Resident (give number) _____
 Student Spouse (F1) Exchange Visitor Spouse (J1) Other (specify type) _____

By signing below, I certify that the information contained on this application and all supporting documentation is true and accurate. I understand that misrepresentation(s) of fact and/or circumstance(s) may give rise to a complaint being filed with the Office of Judicial Affairs for investigation as possible violation(s) of the Fundamental Standard.

Student Signature (required) _____ Date _____

Academic/Departmental/Major Advisor Signature(s) (optional) _____ Print Name _____ Date _____

Bechtel International Center Advisor Signature (if applicable) _____ Print Name _____ Date _____

OAE Advisor Signature (if applicable) _____ Print Name _____ Date _____

Residence Dean Signature (if applicable) _____ Print Name _____ Date _____

UAR Advisor Signature (required) _____ Print Name _____ Date _____

NOTE: The UAR advisor signature indicates that the advisor has reviewed with you the petition process and discussed your situation. The signature does not, necessarily, indicate an endorsement of your request. Advisors may send additional comments to Academic Standing at the address above.

VPUE Use Only

Log _____ Scan1 _____ Decision: ___Approved ___Denied ___Postponed ___Other _____
 Date _____ Date _____ Init. _____ Date _____

Comments: _____

Record _____ Scan2 _____ Notify _____ Forward _____ Reg. Off. Use: _____
 Date _____ Date _____ Date _____ Date _____ Date: _____