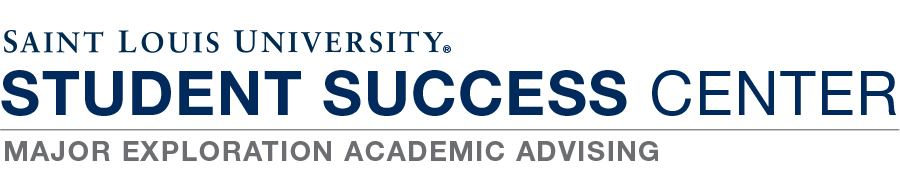
****

**Petition for Reinstatement**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: Click here to enter text. | Banner ID: Click here to enter text. | | Cell Phone: Click here to enter text. | |
| Street Address: Click here to enter text. | | | State: Click here to enter text. | ZIP: Click here to enter text. |
| Semester Dismissed: **Fall 2016** | | Seeking Reinstatement for: **Spring 2017** | | |

**Step 1:** Using the attached GPA calculator, record the minimum semester GPA you must earn in order to attain a cumulative GPA of 2.0 or higher: Click here to enter text.. If you are not able to attain a cumulative GPA of 2.0 within one semester, indicate which semester you will attain a 2.0 cumulative GPA: Click here to enter text..

**Step 2:** Please ensure that the following documents are complete and submitted with your Petition for Reinstatement:

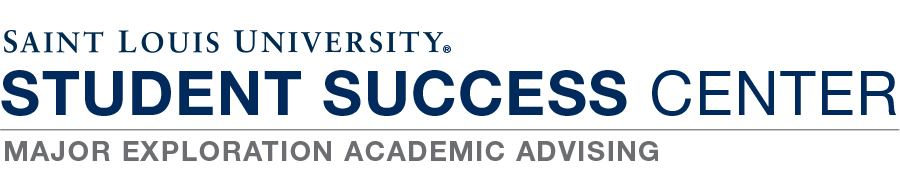
* Completed Self-Assessment (attached)
* A written statement addressing factors that contributed to your dismissal from Saint Louis University, including class attendance, study behaviors, time management, interaction with instructors/advisors, and utilization of success resources (tutoring, writing consultations, supplemental instruction, etc.)
* A detailed action plan that you are committed to following to improve your academic standing
* When applicable, any supporting documentation relevant to your dismissal (e.g.: medical documentation)

**Step 3:** Please initial by each statement below and sign at the bottom of the page. Receiving this petition via your official SLU email address will serve as an electronic signature.

\_\_\_\_\_\_­­­I understand that this Petition for Reinstatement, as well as the supporting documentation, must be received at the University College Office (Student Success Center, BSC 356) no later than **Tuesday, January 3, 2017 at 5:00 PM.** Completed Petition for Reinstatement documents may be returned electronically to Megan Shaffer, Program Director of Major Exploration (shafferme@slu.edu), faxed to 314-977-3486, or mailed to 20 N. Grand Ave, Suite 356, St. Louis MO, 63103.

\_\_\_\_\_\_ I understand that it is my responsibility to contact Megan Shaffer, Program Director of Major Exploration (shafferme@slu.edu), regarding the status of my Petition for Reinstatement if I have not received email confirmation of my status on **Friday, January 6, 2016 at 5:00 PM.**

\_\_\_\_\_\_ I understand that reinstatement is not automatic or guaranteed.

****

**Petition for Reinstatement (Cont.)**

\_\_\_\_\_\_ I understand that if reinstated, failure to attend Saint Louis University during the designated semester of reinstatement will negate this agreement and that I will be required to apply for readmission for any subsequent semester.

\_\_\_\_\_\_ I understand that reinstatement requires specific conditions stated in the probation contract, which will be discussed and completed with Megan Shaffer, Program Director of Major Exploration Advising.

\_\_\_\_\_\_ If reinstated, I must meet with Megan Shaffer, Program Director of Major Exploration no later than **Friday, January 27, 2017.**

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** Click here to enter a date.

**FOR MAJOR EXPLORATION OFFICE USE ONLY**

Deficit Points: Click here to enter text.

Semesters on Probation: Click here to enter text.

Program Director Reinstatement Recommendation: Approved Denied

Comments/Conditions: Click here to enter text.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** Click here to enter a date.