

BGSU Firelands Governance Document Form	Academic Committees	Petition for Reinstatement
Approved by:	Date Approved: 2/24/12	<b>FC 4142</b>

PETITION FOR REINSTATEMENT

NAME: \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

\_\_\_\_\_ ADVISER \_\_\_\_\_

MAJOR \_\_\_\_\_ BGID# \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ ACADEMIC STATUS \_\_\_\_\_

(as listed in letter)

Personal statement (explain reasons for your present academic difficulty and your plans for resolve). Please use reverse side if more space is needed.

Proposed schedule of classes (List specific courses in consultation with your adviser.).

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Student=s signature

Date

Committee action:

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Chairperson, Academic Review Board

Date