

Request for Scholarship Reinstatement

A student has the right to appeal for reinstatement of previously terminated scholarship funding. If your academic record has improved (within two academic semesters of your scholarship termination) to the point that you are again meeting the minimum requirements for your previously awarded scholarship, you may request reinstatement. Please fill out the information indicated below and attach a letter explaining the reasons you did not meet the minimum standards and how you have been able to improve your academic performance.

Please Print Clearly			
Student ID Number:			
Last Name:	First Name:	Middle Name or Initial:	_
E-mail Address:			
Permanent Home Address:			_
City:	State:	Zip:	_
Permanent Phone:	Current Major:	Cumulative GPA:	
Name of scholarship are you requesti	ng reinstatement for:		_
Indicate the semester you stopped	receiving the scholarship:	□ Fall □ Spring Year	
Signature:		_ Date:	

Please return this form and any supporting documentation to the Financial Aid Office, Holloway Hall Room 213