

**FLORIDA STATE UNIVERSITY
COLLEGE OF EDUCATION, HEALTH, AND HUMAN SERVICES
APPLICATION FOR IMMEDIATE REINSTATEMENT TO GRADUATE STUDY**

This form is intended for graduate students applying for immediate reinstatement after academic dismissal by the University Registrar. *Form fields must be typed. **Authenticated digital signatures are required.***

Semester/Year of Reinstatement _____

Student Name _____ EMPLID _____

FSU Student Email Address _____

Student Signature _____ Date _____

To be completed by MAJOR PROFESSOR. The major professor, after consultation with the graduate student, may petition the academic dean for consideration of special circumstances which may constitute justification for reinstatement. ***An academic remediation plan that provides the student an opportunity to correct their GPA deficit (minimum graduate credit hours of enrollment and minimum letter grades earned) within one semester must be included within the justification section of this form.*** Please attach additional pages if needed.

Recommendation and Justification:

(Co-)Major Professor Signature _____ Date _____

(Co-)Major Professor Signature _____ Date _____

Department Chair or Representative/Program Director* Signature _____

Date _____ **Athletic Coaching MS only.*

Academic Dean or Representative Signature _____ Date _____

Return to Lisa M. Beverly, OASIS Assistant Director, oasis-grad@fsu.edu