

# Master's Readmission Request Form

Please complete all information and return the completed form to the Office of Graduate Admission at <http://bit.ly/GradOfficeFormSubmission>

Eagle I.D. Number: \_\_\_\_\_

Student's Full Name: \_\_\_\_\_ Email: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Number and Street

City

State

Zip

Telephone

Please complete the following regarding your returning status:

Degree:  M.A.  M.A.T.  M.S.T.  M.Ed. Program: \_\_\_\_\_

Date of Matriculation \_\_\_\_\_ Expected Graduate Date \_\_\_\_\_  
(Semester and Year) (Semester and Year)

What was the last date you attended classes at the Lynch School? \_\_\_\_\_  
(Semester and Year)

When are you planning to return to the Lynch School? Fall 20\_\_\_\_ Spring 20\_\_\_\_ Summer 20\_\_\_\_

**Please attach a statement explaining the reason you have not been attending classes and a program plan detailing how and when you plan to complete your program.**

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

From what status are you returning?

- Voluntary withdrawal
- Mandatory withdrawal
- Leave of Absence
- Other \_\_\_\_\_

Have you ever received financial aid?

- Yes  No

**For Associate Dean's Office use only:**

Practicum Office Approval (if appropriate):

Readmission is:  Approved  Not approved

\_\_\_\_\_  
Signature of Program Director/Program Coordinator (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Department Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Associate Dean of Students

\_\_\_\_\_  
Date

**After final action:** Form will be processed by the Office for Graduate Admission, Financial Aid, and Student Services. Copies will be sent to the student and faculty advisor, and the original will be kept in the student's file.