

Student Signature

Graduate School Reinstatement Request

To apply for reinstatement to the Graduate School you must fill out the student information and academic status sections and then attach a separate sheet of paper detailing your answers to questions 1 and 2 below. Return the form for approval to your Graduate Program Director. The Graduate School will not act on your request without complete information and GPD approval.

The Graduate School's complete policies and procedures are listed in their entirety in the catalog at https://catalog.luc.edu/academic-standards-regulations/graduate-professional/graduate-school/. The following is a partial listing of policies relevant to Continuous Registration and Reinstatement:

- Continuous Registration: All students, including those who have completed all coursework, are required to register during the academic year (not including summer sessions) until all degree requirements are met, unless on an approved leave of absence. Students who have completed all coursework and are preparing for comprehensive examination and/or preparing a dissertation/thesis proposal are to register for Doctoral Study, Master's Study, or the appropriate departmental course. Once at the dissertation/thesis stage, students must enroll in Dissertation or Thesis Supervision.
- Inactive Status: Students who do not meet the requirements of continuous registration are considered inactive and not in good academic standing. To request reinstatement to active status, the inactive student should discuss the matter with the Graduate Program Director (GPD) and complete this form if the time lapse is one year or less. If the student has been inactive for more than one year, the student must complete the Re-Application for Admission form.

Student Info	mation						
Name				_LUCID			
Email		@luc.edu Phone	()				
Degree Progr	am						
Admit Term Las		erm Enrolled	Reinstate	ement Term Requested			
Please note that this request may take up to 10 working days to process and must be submitted to the Graduate School not later than 2 weeks prior to the start of the requested reinstatement term.							
Academic Sta	tus			_			
Current Status in the Program (please indicate N/A if not a requirement of your program)							
Degree Requirement		Date Completed					
Coursework							
Comprehensi	ve Examinations						
Dissertation/	Thesis Proposal						
Dissertation/	Thesis Text						
Please explain the reason for your absence/lack of enrollment and desire to return to good standing at this time. What is your proposed timeline for the completion of outstanding degree requirements? If you have a dissertation/thesis committee, have you been in communication with your chair? Please include their name and contact information.							

Date

Recommendation of the Faculty:	
I hereby recommend that the following student be reinstated to	their above-listed academic program. The following
conditions have been agreed to (if applicable).	
Graduate Program Director (please print)	
Signature	Date
Return to the Graduate School gradschool@luc.edu	
Graduate School Approval (office use only)	
The Graduate School approves reinstatement to the above stud	ent under the indicated conditions.
Condition Colored Official	D. I.
Graduate School Official	Date