



PETITION FOR REINSTATEMENT TO CLASS FORM

1. Student Name: _____
2. LU Student ID: _____
3. Date: _____
4. Major: _____
5. Term: _____

6. CRN	7. Course	8. Number	9. Section	10. Instructor Signature

11. Student Signature: _____
12. Department Chair (course, not major) Signature: _____
13. *If applicable - Director International Office Signature: _____
14. Records Office Verification (Wimberly Bldg. - Room 102): _____

Please check: International Student: _____ Domestic Student: _____

Instructions:

- Step 1 – Student must complete Numbers 1-4 and 11.
- Step 2 – Instructor must complete - Numbers 5-10.
- Step 3 – Department Chair (course, not major) completes – Number 12
- Step 4 – ***If you are an International Student, you must also obtain the signature from the Director of the International Office for Approval - Number 13.**
- Step 5 – Submit to Record’s Office for verification - Number 14.

With a few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.