

Report on Reinstatement

(Incomplete forms will be returned)

Office of the Registrar

KSIS Effective Date: (check and add year) 1/1 _____ 5/1 _____ 8/1 _____

Today's Date: _____/_____/_____

KSIS ID _____ WID _____

NAME: _____
Last First MI

Has been reinstated by the Academic Standards Committee for the _____
Term Year

Chair, Academic Standards Committee _____ College _____

Change to:

Program Plan Sub-Plan Deg Code Req Term Print Advisor Name

COMMENTS:

Please Retain a Copy for Your Records
Return to Office of the Registrar
118 Anderson Hall
Rev. March 12, 2020