



# Graduate School of Arts and Sciences

## **Petition for Reinstatement to Complete Degree Requirements Following a Personal or Administrative Withdrawal**

To initiate a petition for reinstatement, a student should complete and return this form to the Office of the Dean of the Graduate School of Arts and Sciences (GSAS). Petitions must be submitted by the following deadlines: August 1 for Fall, December 1 for Spring, and April 15 for Summer. If the student is applying for reinstatement and extension of time, please submit each form and supporting documents to the Office of the Dean of GSAS by the respective deadline. For international students, the reinstatement petition must be submitted at least three months prior to the requested reinstatement. International students should contact the Tufts International Center regarding their deadlines.

The GSAS Executive Committee will review the petition. Please know that the Director of Graduate Studies for your department or your advisor will be contacted to endorse this request after receipt of this form by the Office of the Dean of the Graduate School of Arts and Sciences.

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Matriculation Term: \_\_\_\_\_

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

Check if change of address

Email: \_\_\_\_\_

Degree Program (Master's or Doctorate): \_\_\_\_\_

Department: \_\_\_\_\_

Academic Advisor: \_\_\_\_\_

Date of withdrawal: \_\_\_\_\_

Reason for withdrawal (attach separate sheet, if necessary): \_\_\_\_\_

Date reinstatement requested to begin: \_\_\_\_\_

**Petition for Reinstatement to Complete Degree Requirements (continued)**

**Signature**

I acknowledge that this petition will be forwarded to the academic department for their approval or to indicate their lack of endorsement. Also, I understand that reinstatements are not automatic. Reinstatements can be approved or denied for a variety of reasons, such as the student's academic standing at the time of the leave, lack of sufficient progress towards degree, change in funding sources, change in department or graduate school requirements, etc.

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

**Submit form to:**

Office of the Dean, Graduate School of Arts and Sciences, Ballou Hall 1st Floor, Medford MA 02155

**For Graduate School Use Only:**

Date form received: \_\_\_\_\_

Advisor/DGS contacted: Name: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor/DGS Approves: \_\_\_\_\_ Advisor/DGS Does Not Approve: \_\_\_\_\_

Date Reviewed by Executive Committee (EC): \_\_\_\_\_

Approved by EC: \_\_\_\_\_ Not Approved by EC: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_

Date: \_\_\_\_\_