



REQUEST FOR REINSTATEMENT AFTER DROP FOR NON-PAYMENT

Office of the University Registrar

There will be a \$100 per semester credit hour charged in addition to your tuition and fees.

Semester: _____ Year: _____

(Please Print)

Banner ID	Last Name	First Name	MI	Date of Birth
Mailing Address		City, State, Zip	Contact Number	
Email			Student Level	
			<input type="checkbox"/> Concurrent <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	

Reason for non-payment: _____

Courses to be REINSTATED in					
CRN (5-digit)	Crse Prefix (Ex: ENGL)	Crse No. (Ex: 1301)	Crse Sec (Ex: 101)	Cr	Comments

Total hours for reinstatement: _____ X \$100 reinstatement fee = _____ (in addition to tuition & fees)

Acknowledgement: I understand that immediately after being reinstated, I am required to pay for my tuition and fees in full or make arrangements with the Business Office (ZSC 137). Failure to do so will result in being dropped again without the possibility of further reinstatement in the current semester.

Student's Signature: _____ Date: _____

<i>For Registrar's Office Use Only</i>			
Received by: _____	Date: _____	Processed by: _____	Date: _____

Ph.: (956) 326-2250 • Fax: (956) 326-2249

White - University Registrar • Yellow - Student