

INSTRUCTIONS FOR COMPLETION OF GRADUATE PETITION FOR REINSTATEMENT AND/OR EXTENSION

This section explains step-by-step the process to complete the petition. These instructions will help you complete the form that follows. Please print and complete the form and then contact your program office to ensure the accuracy of the information provided prior to submission. Upon approval of the Graduate Program Director your program office will submit your petition to the Office of the Graduate School.

INCOMPLETE OR INCORRECT FORMS WILL BE RETURNED TO YOUR GRADUATE PROGRAM OFFICE.

SECTION 1: COMPLETE THIS SECTION REGARDLESS OF DEGREE LEVEL AND PETITION TYPE

1. Check (✓) your degree level and the type of petition being requested.
2. Provide your name, SSN, department/program, home address (including zip code) and e-mail address.
3. Enter your entry term which is generally the first quarter in which you were registered in your program of study. This date is used in determining the expiration of your time-to-degree and time-to-candidacy limit at the master's and doctoral pre-candidacy program levels.
4. Enter that last quarter registered in your graduate program of study.
5. Enter your official candidacy date. This information is only applicable for doctoral graduate students. This date determines the expiration of your time-to-degree at the doctoral post-candidacy level.

Students petitioning for a Reinstatement should complete SECTION 2.

Students petitioning for a Reinstatement and Extension should complete SECTIONS 2 & 3.

Students petitioning for only an Extension should skip SECTION 2 and go on to SECTION 3.

SECTION 2: REINSTATEMENT

Have you maintained graduate student status by registering for at least 1 graduate credit hour each year?

1. Circle the correct response.
 - a. If yes, go to "Reason for Reinstatement" and complete.
 - b. If no, enter the academic year(s) in which you did not register and then complete "Reason for Reinstatement."

SECTION 3: EXTENSION

Have you had a previous extension(s)?

1. Circle the correct response.
 - a. If your response is "yes," please indicate the approved date(s) of your extension(s), your requested extension date and the "Reason for Extension." This date must have the approval of your advisor and graduate program director.
 - b. If "no," indicate your requested extension date and the "Reason for Extension."

Attach the required documentation and submit to your graduate program director for signature and processing.

This form will be reviewed by the Associate University Dean of the Graduate School and you will be notified via a letter of the decision on your petition. If you have any questions your graduate program will be pleased to help you.

UNIVERSITY OF CINCINNATI
Graduate Petition for
Reinstatement and/or Extension

SECTION 1:

Degree Level:

- Master's
- Doctoral Pre-Candidacy
- Doctoral Post-Candidacy

Petition for:

- Reinstatement - COMPLETE SECTIONS 1 and 2
(Due to failure to register only; contingent upon payment of reinstatement fees)
- Extension - COMPLETE SECTIONS 1 and 3
(Due to approaching time-to-candidacy and time-to-degree expiration date only)
- Reinstatement & Extension - COMPLETE SECTIONS 1, 2 and 3
(Failure to petition for an extension prior to time-to-candidacy and/or time-to-degree expiration date)
- Reinstatement & Extension - COMPLETE SECTIONS 1, 2 and 3
(Failure to register in an academic year and petition for an extension prior to time-to-candidacy and/or time-to-degree expiration date)

Name _____ ID# _____ - _____ - _____

Department/Program _____

Home Address _____

E-mail address: _____

First quarter registered into program: _____
Month Year

7-Year Time-to-Degree
Expiration Date: _____
Month Year
(Master's)

Last quarter registered: _____

5-Year Time-to-Candidacy
Expiration Date: _____
Month Year
(Doctoral Pre-Candidacy)

Official Candidacy Date: _____
Month Year

4-Year Time-to-Degree
Expiration Date: _____
Month Year
(Doctoral Post-Candidacy)

SECTION 2: REINSTATEMENT

1. Have you maintained graduate student status by registering for at least 1 graduate credit hour each academic year? YES NO
2. If not, indicate year(s) of non-registration: _____
(example, 2002-03, etc.)

REASON FOR REINSTATEMENT (attach additional page(s), if necessary):

SECTION 3: EXTENSION

1. Have you had a previous extension(s)? YES NO

2. If yes, please indicate date(s) (month/year): _____
 Month Year

3. Extension requested to: _____
 Month Year

REASON FOR EXTENSION (attach additional page(s), if necessary):

SIGNATURES

Include the following items with this petition:

- 1. Description of progress towards degree
- 2. Degree completion to date
- 3. Plan for degree completion
- 4. Letter of support from your Graduate Program Director

Faculty Advisor signature _____ **Date** _____

Graduate Program Director signature _____ **Date** _____

College Dean/Associate Dean signature _____ **Date** _____

Associate Dean of the Graduate School signature _____ **Date** _____

(For Office of the Graduate School Use Only)

Reinstatement Fee Assessment: _____ 1 Year _____ 2 Years _____ 3 Years

Fee Due Date: _____
 (MM/DD/YY)