



Student's Name: _____ UIN#: _____

College: _____ Degree and Program: _____

Graduate Degree Seeking Status:

Degree Seeking Certificate Seeking Licensure Seeking Non-Degree Seeking

The University's Reinstatement Policy for Suspended Graduate Students provides a mechanism for obtaining reinstatement to graduate study, if certain conditions are met. Completion of the Graduate Program Director's Recommendation Form is required as part of the appeal process.

Please note: Graduate students can only be reinstated from suspension one time. If they are suspended a second time, they should be dismissed from the program.

To be completed by the Graduate Program Director:

1. Please evaluate the basis for the student's request for reinstatement as stated in his/her letter.

2. Please evaluate the student's potential for success in completing his/her graduate program.

3. If student is currently in a NON-DEGREE status, is he/she presently eligible for admission to your graduate degree program?

- Yes
- No
- Not Applicable

4. Please list the required graduate courses to be taken as part of the plan of study. (Minimum of 12 credits is required)

Prefix	Course No.	Course Title	Semester to be taken	Credits
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5. Please provide your summary recommendation concerning the student's reinstatement request.

Graduate Program Director's Determination (check one):

- I approve the student's request for reinstatement.*
- I deny the student's request for reinstatement.*

Department Chair's/Dean's Determination (check one):

- I agree with the GPD's decision to approve reinstatement.*
- I agree with the GPD's decision to deny reinstatement.*

Graduate Program Director's Name:

Signature: _____

Date: _____

Department Chair's or Dean's Name:

Signature: _____

Date: _____

Note: Graduate Program Director and Department Chair or Dean must be in agreement in the reinstatement decision.

Please send complete reinstatement package electronically to the Graduate School at graduateschool@odu.edu. Package should include the following:

1. Student's written request for reinstatement
2. The completed G4 form
3. A copy of the letter to the student advising of the outcome. Do not give student copy of G4 form.

Copies: Graduate Program Director
 VISA (intlstu@odu.edu) for F-1 and J-1 Visa Holders ONLY

General Graduate Form: G4
 (Rev. 08/2019)