



# WORCESTER STATE UNIVERSITY

## REINSTATEMENT APPLICATION

This application is for students who want to reactivate their degree status in an undergraduate program. If you have attended another institution since last attending WSU, an official transcript will need to be sent to the Registrar's Office.

NAME: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Student ID # \_\_\_\_\_

ADDRESS: Street \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
TELEPHONE: Home \_\_\_\_\_ Cell \_\_\_\_\_

EMAIL: \_\_\_\_\_ FORMER NAME(S): \_\_\_\_\_

ATTENDED WORCESTER STATE UNIVERSITY: 19\_\_\_\_-19\_\_\_\_; 19\_\_\_\_-20\_\_\_\_; 20\_\_\_\_-20\_\_\_\_

REINSTATE: \*JANUARY 20\_\_\_\_ \*SUMMER 20\_\_\_\_ \*SEPTEMBER 20\_\_\_\_  
(Circle one) \*FORM MUST BE SUBMITTED BY: JANUARY 1 FOR SPRING SEMESTER  
APRIL 1 FOR SUMMER SESSIONS  
AUGUST 1 FOR FALL SEMESTER

Attended another University since last attending  
WSU? If so, please state name of  
University: \_\_\_\_\_

### DECLARATION OF MAJOR:

- \_\_\_ ART
- \_\_\_ BIOLOGY
- \_\_\_ BIOTECHNOLOGY
- \_\_\_ BUSINESS ADMINISTRATION
- \_\_\_ CHEMISTRY
- \_\_\_ COMMUNICATION
- \_\_\_ COMMUNICATION SCIENCES & DISORDERS
- \_\_\_ COMPUTER SCIENCE
- \_\_\_ CRIMINAL JUSTICE
- \_\_\_ ECONOMICS
- \_\_\_ EDUCATION
- check one:  Early Childhood or  Elementary
- \_\_\_ ENGLISH
- \_\_\_ ENVIRONMENTAL SCIENCE

- \_\_\_ GEOGRAPHY
- \_\_\_ HISTORY
- \_\_\_ LIBERAL STUDIES  
(Department permission must be obtained)
- \_\_\_ MATHEMATICS
- \_\_\_ MATH FOR ELEMENTARY EDUCATION  
(Must also be an Elementary Education major)
- \_\_\_ POLITICAL SCIENCE
- \_\_\_ PSYCHOLOGY
- \_\_\_ PUBLIC HEALTH
- \_\_\_ SOCIOLOGY
- \_\_\_ SPANISH
- \_\_\_ SPANISH TRANSLATION
- \_\_\_ THEATRE
- \_\_\_ UNDECLARED
- \_\_\_ URBAN STUDIES
- \_\_\_ VISUAL AND PERFORMING ARTS

### BY SIGNING THIS FORM,

I understand that I am subject to the university requirements in effect at the time of my reinstatement. If another institution has been attended (as named above on this form), I certify enrollment at that institution and I will send an official transcript to the Registrar's Office in a timely manner.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

### OFFICE USE ONLY

REVIEWED BY: \_\_\_\_\_ WSU STUDENT ID #: \_\_\_\_\_

RECOMMEND: \_\_\_\_\_ DATE REACTIVATED: \_\_\_\_\_