UNIVERSITY OF THE
PACIFIC

Application to Request Reinstatement to Graduate Program

Student Information:

LEGAL NAME:

Last	First	Middle

Former Name(s) : _____   *if applicable*

Pacific ID#: _____   **Date of Birth:** _____

Current Email: _____   **Phone:** _____

Mailing Address: _____

City	State	Zip

Application Information:

Reinstatement term: ☐ Fall   ☐ Spring   ☐ Summer   Year: _____
*See Program for appropriate Re-Admit deadline

There is a $50.00 reinstatement fee. Applications submitted without payment will not be processed.

Pacific Information:

Previous degree information:

School/College: _____

Major: _____   **Degree Sought:** _____

Advisor: _____

Previous attendance as a graduate student at Pacific

Start Term: ☐ Fall   ☐ Spring   ☐ Summer   Year: _____
Last Term: ☐ Fall   ☐ Spring   ☐ Summer   Year: _____

Interested reinstatement degree information *if different from above:

School/College: _____

Major: _____   **Degree Sought:** _____

Reason for change: _____

Application to Request Reinstatement to Graduate Program

Last Name: _____   **Pacific ID#:** _____

Reinstatement Information:

List in chronological order all schools attended since leaving Pacific. Request each school listed to send an official transcript to Graduate Admission Office (including coursework in progress).

Institution	City/State	Dates of Attendance	Indicate degree earned

Since leaving Pacific, have you been dismissed, suspended, or placed on probation by any other school?

☐ No   ☐ Yes   If yes please explain:

Explain why you left Pacific and what prompts you to return?

I hereby apply for reinstatement to the Graduate School at the University of the Pacific and certify that the information provided on this form is accurate and complete, to the best of my knowledge. I also agree to uphold the principles of the Pacific student Honor Code.

_____   _____
Applicant Signature   Date

Program Decision:

☐ Approved
☐ Denied

_____   _____   _____
Print Name   Signature   Date

Graduate School Decision:

☐ Approved
☐ Denied

_____   _____   _____
Print Name   Signature   Date

Submission Instructions:
1. Return completed application to gradadmission@pacific.edu.
2. Pay $50 reinstatement fee HERE.