

Application for Reinstatement

Date: _____

Student ID#: _____

Name (Last, First, MI): _____

ADDRESS (Street, City, State, ZIP): _____

PHONE: _____ EMAIL: _____

Last semester of attendance at CSULB: _____

(You may request reinstatement only if you have remained outside of the University for at least one Fall or Spring semester.)

INSTRUCTIONS TO THE STUDENT:

Next to category, list the course(s) you have completed that count in that category and the grade earned in each. If you have repeated a course, list all grades earned. Please list courses that were completed before you were placed on probation/disqualified in the left column, and list courses completed while you were on probation/disqualified in the right column.

To be filled out by student

GENERAL EDUCATION	BEFORE DISQUALIFICATION	WHILE DISQUALIFIED
A.1 Written English		
A.2 Oral Communication		
A.3 Critical Thinking		
B.1.a Life Science with Lab		
B.1.b Physical Science with Lab		
B.2 Mathematics		
B.3 Additional Category		
C.1 Fine Arts		
C.2 (At least 2 of the categories from a, b, c)		
a. Literature		
b. Philosophy		
c. Foreign Language		
C.3 Additional units in Category C		
D.1.a U.S. History		
D.1.b U.S. Constitution and American Ideals (Political Science)		
D. World Societies and Cultures (D.2.a.) OR Global Issues		
D.2 Social and Behavioral Science		
E. Self Integration		

California State University, Long Beach

Enrollment Services

Name (Last, First, MI): _____

Major _____

PLANS FOR THE NEXT TWO SEMESTERS:

Number of hours/week employment planned: _____

PLANNED PROGRAM

FIRST SEMESTER	SECOND SEMESTER

Explain what is different now that leads you to expect academic success:

As Major Department Advisor, I certify that this plan is reasonable and the student has the possibility of earning the degree. I recommend that this student be reinstated.

Major Department Advisor's Signature / Print
(University Center for Undergraduate Advising For
Undeclared Major)

Department

Date