



Request for Course Reinstatement

(Request to re-register in a course from which the student has been dropped)

Please NOTE that the LAST DAY to REQUEST Reinstatement will be the LAST DAY of the WITHDRAW DATE for each respective semester.

Student Name (print): _____ TSC ID#: _____

Street Address _____ City _____ State _____ Zip _____

Telephone number: _____ Email address: _____

Course to be reinstated (a separate form must be completed for each course):
Course: _____ # of Semester Credit Hrs _____
Lab: _____ # of Semester Credit Hrs _____
Instructor's Name: _____ Semester & Year: _____
Reason for Reinstatement: _____

I understand I am responsible for all tuition and fees associated with this request, including a \$150 reinstatement fee (this fee would only be assessed after Official Record Date of respective semester). To complete the reinstatement process, I understand that these amounts must be paid in full, or payment arrangements made with the TSC Cashier's, the same day I submit this request to the Office of Admissions and Records. Failure to make payment or payment arrangements the same day the completed form is submitted may void the reinstatement request.

NOTE: SIGNATURES MUST BE OBTAINED IN THE FOLLOWING ORDER:

Student Signature: _____ Date: _____

Course Instructor: _____ Date: _____ [] Approved [] Denied

Dept. Chair or Dean of Division: _____ Date: _____ [] Approved [] Denied

After obtaining signatures, the respective Dean's administrative assistant will scan and email this form to christian.torres@tsc.edu (or hand deliver by the office to the Office of Admissions & Records) in order to get processed. Student will then be notified to contact the Cashier Windows in Tandy Building for payment or payment arrangements.

Office of Admissions and Records Use Only:

Received By: _____ Date: _____