

*For applicants who have attended another college or university since leaving The University of the South*



## STATEMENT OF GOOD STANDING FOR REINSTATEMENT

Office of the Dean of the College (931) 598-1187

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**To the Student:** Please complete this section before submitting to each appropriate official at each college or university you have attended since leaving The University of the South.

**Student's name** \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**Student ID # at this College or University** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Name of College / University** \_\_\_\_\_ **Location** \_\_\_\_\_

Some institutions and individuals may require that you waive your right to review this form before completing it on your behalf. Please inquire of the Dean of Students at this college or university to determine whether he or she requires such a waiver, and then complete the following:

- I waive my right to review this form, and I understand I will never see this form or any other supplements submitted on my behalf.
- I do not waive my right to review this form and any supplements submitted on my behalf.

I authorize the Dean of Students or other appropriate official to release the information below from my educational, social, disciplinary, and behavioral records of the above-named institution.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**To the Dean of Students or Other Appropriate Official:** Referring to the above-named student, please complete this section and return to The Office of the College, 735 University Avenue, The University of the South, Sewanee, TN 37383-1000.

**Is this student in good academic standing at your institution?**  Yes  No

**Is this student eligible to re-enroll at your institution?**  Yes  No

*If you answered "no" to either or both questions above, please explain on an additional sheet.*

**Has the student ever been found responsible for a disciplinary violation at your school, whether related to academic or behavioral misconduct, that resulted in the student's probation, suspension, removal, dismissal, or expulsion from your institution?**  Yes  No

**To your knowledge, has the applicant ever been convicted of a misdemeanor, felony, or other crime?**  Yes  No

*If you answered "yes" to either or both questions above, please explain on an additional sheet.*

- Check here if you would prefer to discuss this student over the phone with a representative of the committee on reinstatement.**

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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Printed Name \_\_\_\_\_ Title \_\_\_\_\_

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Work Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_