

Request for Reinstatement of Lapsed Doctoral Matriculation

Office of Doctoral Studies ▪ 82 Washington Square East, 2nd Floor, NY, NY 10003-6680 ▪ (212) 998-5044

Student Information

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First Name		Last Name		ID Number
Street Address		City	State	Zip Code
				Email Address
Department	Program	Program Code		Degree Objective (PhD or EdD)
Date of Initial Matriculation	Last Date of Attendance	Anticipated Graduation Date		Remaining Number of Credits

Instructions: Complete the information in the box above and submit this form to the Office of Doctoral Studies, 82 Washington Square East, 2nd Floor. All requests for reinstatement of matriculation require the signature of your dissertation committee chair or program advisor. Upon approval of your request for reinstatement, you will be required to register retroactively for DCADV-GE 3400 Doctoral Advisement (1 point) for any and all semesters when you were not registered for at least 3 points of coursework or on an approved leave of absence.

Please briefly describe the reason(s) for the lapse in your doctoral matriculation as well as your plans for making satisfactory academic progress toward the completion of your degree (use the reverse side of this form if necessary):

Dissertation Committee Chair or Program Advisor: By my signature below, I endorse the above-named student's request for reinstatement of matriculation.

Signature of Dissertation Committee Chair or Program Advisor	Print Name	Department	Date