



Reinstatement Application

Please complete this form if you have been dismissed or deactivated from Arrupe College and wish to reinstate your program status.

Name: _____ LID: 0000 _____

Phone: _____ Email: _____

Last Attended: Year: 20 _____; Term: _____ Today's Date: _____

Current Address: _____

City: _____ State: _____ Zip: _____

■ Reason for appeal:

On the next page, explain why you desire to reactivate your program status in detail.

In your letter, you should include information regarding your activities while away from the College, and describe your academic and social approach(es) to success upon your return.

If you completed coursework at another college or university, please include this in your remarks and send transcripts to:

The Office of Academic Affairs
Arrupe College of Loyola University Chicago
820 N. Michigan Avenue
Chicago, IL 60611

And

The Office of Registration and Records
Loyola University Chicago
820 N. Michigan Avenue, Ste. 510
Chicago, IL 60611

Feel free to include any other documentation you feel might support your appeal. If you do, please note each item's relevance in your letter.

Student signature: _____ Date: _____

For office use only

I formally _____ *this student's request for readmission to Arrupe College*

Dean's signature: _____ Date: _____

Dr. Jennifer Boyle, Associate Dean for Academic Affairs

Student decision notification sent via _____ email _____ letter _____ phone on _____ (Date)