GSE READMISSION PETITION – SUMMER ONLY!
DEADLINE: MAY 31st

Please note: This form is for students NOT continuously registered. You need to fill out this form AND register with SUMMER SESSIONS.

READMISSION request for SUMMER _____________

SID#: ___________________________ Program: ___________________________

Name:_____________________________________________________________

Email:_____________________________________________________________

Phone #: ___________________________ Last Term Registered:_______________

Reason for Summer Readmission:_______________________________________
_________________________________________________________________

Summer Course(s): *3 units minimum*

_________________________________________________________________

_________________________________________________________________

Student’s Signature:_________________________________________________

Approval – TWO Signatures Required:
(MA Readers or Dissertation Committee Members)

_________________________________________________________________

_________________________________________________________________

Head Graduate Advisor’s Signature:_____________________________________

Date: ____________________________

_____ Approved  _____ Denied