



KASKASKIA COLLEGE
REQUEST FOR REINSTATEMENT

**R
E
I
N
S
T
A
T
E
M
E
N
T

F
O
R
M**

Name (Print) _____ KC ID. _____
Last *First* *MI*

Today's Date _____ 20_____

COURSE PREFIX	COURSE NO.	SECTION	CREDIT HRS.

Student Signature _____ Semester --- Fall Spring Summer

Instructor Approval _____ Date _____
(Signature)

Recorded by Admissions and Records _____ Date _____
(Initials)

Registrar _____
(Initials) *(Date)*

Copies White – Student File
 Yellow – Financial Aid
 Pink – Instructor



KASKASKIA COLLEGE
REQUEST FOR REINSTATEMENT

**R
E
I
N
S
T
A
T
E
M
E
N
T

F
O
R
M**

Name (Print) _____ KC ID. _____
Last *First* *MI*

Today's Date _____ 20_____

COURSE PREFIX	COURSE NO.	SECTION	CREDIT HRS.

Student Signature _____ Semester --- Fall Spring Summer

Instructor Approval _____ Date _____
(Signature)

Recorded by Admissions and Records _____ Date _____
(Initials)

Registrar _____
(Initials) *(Date)*

Copies White – Student File
 Yellow – Financial Aid
 Pink – Instructor