



UO ID _____ Last Name _____ First Name _____

UO Email _____ Major _____ Mailing Address: _____

Degree Level (check one): Masters _____ Doctoral _____ Certificate _____

This form must be filed when a student wishes to return to the same graduate program after a break in enrollment. The petition must be endorsed by your graduate advisor and by the head of your school or department before it can be submitted to the Graduate School for review. **Petitions are subject to a fee of \$15.00.**

Last Term of Enrollment Requested Term of Return Oregon Residency (for tuition purposes)

_____ Year _____ Term _____ Year Resident: I have lived in Oregon continuously since _____ Month _____ Year

Non-Resident See admissions.uoregon.edu/residency for residency policies

Student Statement: (attach separate page if necessary)

Explain why you were not continuously enrolled, what requirements are left to complete, and the term and year you plan to complete your program.

Student Signature: _____ Date: _____

Advisor Statement and Recommendation:

Signature *Printed Name* *Date*

Dean, Department Head, or Director of Graduate Studies Statement and Recommendation:

Signature *Printed Name* *Date*

Graduate School Decision: Approved _____ Denied _____
Return Term _____ Major Code _____ Student Type _____

Comments:

Dean or Designee: _____
Signature *Printed Name* *Date*