

USF ID: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ USF Email: \_\_\_\_\_

**Term of Registration (Select One):**  Fall  Spring  Summer A or C  Summer B Year: \_\_\_\_\_

The University of South Florida will approve a petition for reinstatement if the student is unable to make payment on time due to circumstances determined by the University to be exceptional and beyond the control of the student. Petitions must be submitted within two years of the cancelled registration. Requests must meet one of the conditions listed below to be considered:

University error. A letter (on University letterhead) signed by an appropriate University official from the department responsible or an appropriate official University document must be included with your petition.

Extraordinary circumstances such as severe illness, death in the immediate family (parent, spouse, child or sibling)

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