

WASHINGTON AND LEE  
UNIVERSITY

**Application for Reinstatement**

**Instructions: This application, along with all required materials, must be returned to the Office of the Dean of the College.** No action on reinstatement can be taken by the Committee on the Automatic Rule and Reinstatement until all of the required materials have been received. It is the applicant's responsibility to verify that the application and all supporting materials are received prior to the deadline. Deadlines are **November 15 for Winter Term and March 1 for Spring Term. Students applying for Fall-Term reinstatement may submit applications by either May 15 or August 1.**

*Application Components:*

1. This application, properly completed.
2. If applicant attended another college or university since leaving Washington and Lee:
  - o official transcript(s) of all work completed.
  - o catalog descriptions or syllabi from courses taken at other colleges/universities.
  - o a letter from at least one instructor indicating academic progress and promise.
  - o a letter from a college official verifying eligibility to return to or continue at the other institution and explaining any period(s) of probation. (See required form attached for official's statement.)
3. If applicant served in the armed forces since leaving Washington and Lee:
  - o a letter from last commanding officer indicating satisfactory performance or duty.
  - o evidence of honorable release from the armed forces.
4. If applicant was employed or volunteered/performed community service since leaving Washington and Lee:
  - o a letter from a supervisor at each position indicating the applicant's responsibilities, dates of employment, hours worked per week, and level of performance.
5. If withdrawal was for medical, emotional, or psychological reasons:
  - o a letter from a treating physician, psychologist or counselor indicating applicant is ready to return to college.  
(See required form attached for consent to release the other case information.)
6. Any other materials required to fulfill specific expectations established in applicant's withdrawal letter from W&L's Dean of Students or the Associate Dean of the College.

Upon receipt of this material, your application will be submitted to the Committee on the Automatic Rule and Reinstatement, and you will be informed of its decision. *The committee meets in the weeks following each deadline and will make its decision in light of the above information and after consideration of the student's academic record at Washington and Lee. A student will not be reinstated if required progress toward graduation is not feasible, or if continued separation is considered to be in the best interest of the student or the University.*

\* \* \* \* \*

Name of Applicant \_\_\_\_\_

Home Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Present Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Present Telephone Number \_\_\_\_\_ Present E-mail Address \_\_\_\_\_

Name(s) of Parent(s) or Guardian(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Date you wish to re-enter Washington and Lee \_\_\_\_\_

Dates of Attendance at Washington and Lee \_\_\_\_\_

Reasons for Leaving Washington and Lee \_\_\_\_\_

APPLICANT SHOULD NOT WRITE BELOW THIS LINE

Committee action \_\_\_\_\_ Returns as \_\_\_\_\_

Remarks:

Please return to the Office of the Dean of the College

**Activities since leaving Washington and Lee (use additional sheet if necessary):**

**College(s) Attended**

Name of College	Location	Dates
Name of College	Location	Dates

**Military Service**

Branch	Location	Dates

**Community Service**

Name of Organization	Location	Dates
Name of Organization	Location	Dates

**Employment**

Name of Employer	Location	Dates
Name of Employer	Location	Dates

If you are reinstated to Washington and Lee, what major(s) will you pursue? \_\_\_\_\_

Are you hoping to graduate from Washington and Lee after you have completed the required number of academic terms in residence?

Yes \_\_\_\_\_ (Expected graduation date: \_\_\_\_\_)

No \_\_\_\_\_ (If no, please explain.)

Since you were last enrolled at Washington and Lee, have you been convicted of any honor violation, placed on probation, suspended or dismissed from any school, or have you been arrested, charged or convicted of any offense for which arrest, charge or conviction has not been expunged (other than parking violations), or are any such charges pending against you?

No \_\_\_\_\_

Yes \_\_\_\_\_ (If yes, please provide a written explanation.)

**Please return to the Office of the Dean of the College**

Write below why you wish to re-enter Washington and Lee, and if you fell under the Automatic Rule or were on academic probation, why you believe you can now do satisfactory work at Washington and Lee. *Please be candid and address your situation completely.* You may wish to attach a letter in order to set forth your reasons fully.

I certify that the answers and information provided in the application are accurate and complete and that I have a continuing duty to inform the Chair of the Committee on Automatic Rule and Reinstatement of any changes to the information provided. I understand further that any false, misleading or incomplete answers or statements made in this application constitute grounds for rescission or dismissal at the option of the University.

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**Date**

**Signature**

In compliance with Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and all other applicable non-discrimination laws, Washington and Lee University does not discriminate on the basis of race, color, religion, national or ethnic origin, sex, sexual orientation, age, disability, veteran's status, or genetic information in its educational programs and activities, admissions, and with regard to employment. Inquiries may be directed to the Interim Provost, Robert A. Strong, Mattingly House, (540) 458-8418, strongr@wlu.edu, who is designated by the University to coordinate compliance efforts and carry out its responsibilities under Title IX, as well as those under Section 504 and other applicable non-discrimination laws.



WASHINGTON AND LEE  
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***Confidential Health Care Information Consent to Release  
for Reinstatement Application***

**Please return to the Office of the Dean of the College**

**Student Information:**

Name \_\_\_\_\_  
DOB \_\_\_\_\_ SSN \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

**Physician/Counselor Information:**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Person, agency or provider to whom disclosure is to be made:

Washington and Lee University Student Health Center Lexington, VA 24450-2116 Phone (540) 458-8401 Fax (540) 458-8404	or	Washington and Lee University University Counseling Service Lexington, VA 24450-2116 Phone (540) 458-8590 Fax (540) 458-8989
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Information or records to be disclosed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As the person signing this consent, I understand that I am giving my permission to the above-named physician and/or counselor for disclosure of requested confidential health care information and/or records to health care providers at Washington and Lee University. The purpose of its information and/or records is to assist in determining my readiness to return to Washington and Lee University as a full-time student after a leave for medical or psychological reasons. I also give permission for phone consultation between health care providers, which may be required to clarify any information and/or records that are disclosed. I understand that the Health Center and/or Counseling Service providers will make a recommendation to the Committee on the Automatic Rule and Reinstatement based on this confidential health care information regarding reinstatement, as well as any requirements for ongoing care on my return to Washington and Lee University. This information and/or records will be maintained in my confidential health and/or counseling record at Washington and Lee University, and will not be re-disclosed without my separate written consent, unless such disclosure is permitted by law.

Signature \_\_\_\_\_

Date \_\_\_\_\_