

Reinstatement to the Register of Graduate Students



**UNIVERSITY OF
CAMBRIDGE**

Board of Graduate Studies

Application Form

graduate.students@admin.cam.ac.uk
<http://www.admin.cam.ac.uk/offices/gradstud/>

Are you registered as a Full or Part-time student?	
Full Time (✓)	Part-time (✓)

Please arrange for all parts of this form to be completed. Your Degree Committee's contact details can be found on: <http://www.admin.cam.ac.uk/offices/gradstud/current/contact/degcomaddresses.pdf>

To be completed by Student

Surname (Family Name)	Forenames	Title
Address		Email
		Phone
Department/Faculty		College
State which term you wish to be reinstated from (i.e Lent, Easter or Michaelmas Term & which year)		
Proposed Date for Thesis Submission		
Reason(s) for application (continue on an attached piece of paper if necessary)		
I confirm that the information which I have given in this application is complete and true		
Signature:		Date:

Principal Supervisor's recommendation

I recommend that this application be:		
Approved ()	Declined* ()	
* Please attach a note of explanation if it is recommended that the application be declined		
Comments (continue on an attached piece of paper if necessary)		
Name	Signature	Date

College recommendation

The College recommend that this application be:

Approved ()

Declined* ()

* Please attach a note of explanation if it is recommended that the application be declined

Comments (continue on an attached piece of paper if necessary)

Authorised Officer of College

Signature

Date

Head of Department recommendation

The Department recommend that this application be:

Approved ()

Declined* ()

* Please attach a note of explanation if it is recommended that the application be declined

i) reinstated to the Register with effect
from:

ii) a new submission date of:

Comments (continue on an attached piece of paper if necessary)

Head of Department

Signature

Date

Degree Committee recommendation

The Degree Committee recommend that this application be:

Approved ()

Declined* ()

* Please attach a note of explanation if it is recommended that the application be declined

i) reinstated to the Register with effect
from:

ii) a new submission date of:

Comments (continue on an attached piece of paper if necessary)

Authorised Officer of Degree Committee

Signature

Date

Board of Graduate Studies comments

Approval confirmed

Yes ()

No ()

i) reinstated to the Register with effect
from:

ii) a new submission date of:

Comments (continue on an attached piece of paper if necessary)

Authorised Officer of Board

Signature

Date