



Office of Admissions and Records
 Attention: Linda Parr
 3007 N. Ben Wilson, Room 104
 Victoria, Texas 77901
 Fax: 361/580-5500

Office Use Only:		
Month	Day	Initials
Bursar _____		
Financial Aid _____		
Deadline _____		

REINSTATEMENT FORM

Spring

Summer

Fall

Please Print:

Student PeopleSoft ID#	E-mail Address
Last Name First M.I.	Daytime Phone #
Address	
City State Zip	

ADDS

Course Name/Course Number	Class/Section Number	Course Name/Course Number	Class/Section Number
Course Name/Course Number	Class/Section Number	Course Name/Course Number	Class/Section Number
Course Name/Course Number	Class/Section Number	Course Name/Course Number	Class/Section Number

 Student's Signature (**REQUIRED**) Date

Your Next Steps:

1. Watch for an e-mail notification with your payment amount and deadline at the e-mail address you provided on this form.
2. Pay that amount within three business days. The payment amount will include tuition and fees, reinstatement and/or late fees.

Please contact Linda Parr at parrl@uhv.edu or 361-570-4119 if you have any questions.