



Diversity Excellence Scholarship Reinstatement Petition

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General Information:

Full Name: _____ UO ID#: _____
Email: _____ Phone Number: _____
Major: _____ Overall GPA: _____
Expected Graduation: _____

Petition Process:

All students must complete this petition for reinstatement consideration. Please answer all questions completely and with as much detail as possible, including attaching all relevant documentation. All petitions must be submitted to your DES adviser by 5pm Friday of Week 2 and you may attach additional pages as needed.

I. Please check the reason(s) your DES award was not renewed:

- Earned fewer than 12 credits in the previous term
- Cumulative GPA below DES required: _____ GPA
- Extenuating circumstances

II. Statement of Appeal:

Please submit a statement detailing the unusual or extenuating circumstances that prevented you from completing your DES requirements as stated in your contract (up to 1 page, single-spaced).

III. Statement of Intent:

Please submit a statement explaining what you have done and what you intend to do to ensure that you meet all of your DES requirements in the future and how you will get back on track academically (tutoring, counseling, etc.). Up to 1 page, single-spaced.

IV. Meet with an academic adviser:

Please meet with an academic or department adviser to develop a grad plan and include with this petition

Advisor Signature _____ Advisor Title _____

Advisor Name (print) _____

The adviser is acknowledging that they have met with this student and has developed a four-year academic plan.

Student Signature _____ Date _____

I have completed all sections of the petition and understand my requirements as a DES recipient. All statements are accurate and true.

Petition Committee Action:

Approved _____ Denied _____ Returned _____ Pending _____

Comments: