ST. JOHN'S UNIVERSITY

Fall 2026 Reinstatement of Courses Agreement

Please complete this form if you are requesting reinstatement of your **Fall 2026** courses, which were dropped due to non-payment of the balance due or non-confirmation of attendance with financial aid credit (on UIS).

Only students who have uploaded all medical forms & accepted the Student Financial Responsibility Agreement will be reinstated.

By completing this request for reinstatement, you are acknowledging the following:

- I accept responsibility for payment of all tuition and fees for courses for which I re-enroll and, if applicable, all room and meal charges. I also understand that payment for all charges is due upon registration and if I do not make payment in full or enroll in a payment plan, my classes will be dropped with no further option to be reinstated.
- I confirm that I have been regularly attending the courses listed below and have discussed my enrollment eligibility with each of my professors.
- I understand if my balance is covered in full by financial aid, I need to confirm this with a Student Financial Services representative upon my reinstatement.
- I understand that enrollment status change may affect my university or private health plan coverage, financial aid awards, and if applicable, my federal loan repayment status. I understand that if my aid eligibility changes, I will be responsible for the tuition/fees not covered by aid.
- I understand if I fail to make my payment plan installments or if any of my payments default, I will have a hold put on my account, will be prevented from registering for future semesters, and will be responsible for interest that will accrue at a rate 1% monthly until my bill is paid in full.
- I understand that if I withdraw completely from the University after being reinstated, or if I fail to complete the enrollment process, and I currently qualify for a Federal Direct Loan under a legacy or interim exception provision (including, where applicable, Parent PLUS Loan eligibility for a parent of a dependent undergraduate student), I may lose eligibility for certain legacy or transitional federal loan benefits associated with enrollment periods preceding July 1, 2026. I further understand that any future federal student loan eligibility will be determined under the federal statutes and regulations in effect at the time of future enrollment, including applicable annual and aggregate borrowing limits, program eligibility requirements, remaining borrowing capacity, and prior federal student loan borrowing. The University cannot guarantee future federal student loan eligibility.

Student's Name (print):_____ X-ID: _____ Phone # (_____) _____ - _____

COURSE INFORMATION - Please list each course you are attending and for which you are seeking reinstatement:		
Subject and Course Number (Ex: PSY 2240)	5-digit CRN	*Professor's Signature and Date Required Starting 9/21/2026 (*Confirms student has been participating and is eligible to re-enroll in your class) Professors do NOT have to sign this form if you have not been attending.
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

Student Signature (must sign): _____ Date_____

Dean's/Advisor's Signature (req starting 9/21/2026): _____ Date_____