

## FCE Reinstatement Form

**(Please type all fields)**

Student Name: <a href="#">Click here to enter text.</a>	Student NID: <a href="#">NClick here to enter NID.</a>
Degree: <a href="#">Click to choose degree.</a>	Major: <a href="#">Click here to enter text.</a>
Original Term of Entry: <a href="#">Click here to enter text.</a>	Last Term of Registration: <a href="#">Click here to enter text.</a>
Concentration (if applicable): <a href="#">Click here to enter text.</a>	Minor (if applicable): <a href="#">Click here to enter text.</a>
Requested Reinstatement Term: <a href="#">Click here to enter text.</a>	DCP Cohort Code: <a href="#">FADONLNDCP</a>

Home Phone Number: [Click here to enter text.](#)      Day Time Phone Number: [click to enter text.](#)

Home Address: [Click here to enter text.](#)

List any academic institutions you may have attended since your last enrollment at NSU (you will need to provide official transcripts for any coursework you have completed since your last enrollment):

[Click here to enter text.](#)

### Criminal Offense Disclosure:

*Have you ever been convicted of a criminal offense in any city, state or country, other than minor traffic offense; entered into a plea of guilty or nolo contendere (no contest) to a criminal offense; had adjudication of guilt withheld for a criminal offense; participated in a first-offender or pre-trial diversion program, or its equivalent; or committed any criminal offense where the records have been sealed or expunged?*

Are there any pending criminal charges that have been filed against you?\*

Are you currently incarcerated or will you be incarcerated upon or during your enrollment at NSU?\*

### Licensure Disclosure:

*Have you been denied professional licensure; had a professional license revoked or suspended; or have been subject to disciplinary action by any licensure board or agency?*

If the answer is Yes to any or all of the questions listed above, please provide dates and details.

*I understand disclosure is a continuing duty. All applicants are advised to contact their local/state licensing agency to determine if the conviction or record would prohibit or delay licensure. It is further advisable to contact the program director to ensure the availability for clinical placement or clinical rotations. All applicants must report to Nova Southeastern University any such conviction that occurs after filing their application or during their enrollment at Nova Southeastern University. The admissions committee will consider newly submitted information and, in appropriate circumstances, may change status of the applicant or student.*

Student Electronic Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**The below section will be completed by FCE administration**

Advisor Name: **Robert Stevens**

Advisor E-mail: [fcdecip@nova.edu](mailto:fcdecip@nova.edu)

Advisor Phone: **(954) 262-8506**

Date: [Click here to enter a date.](#)

Reinstatement term: <a href="#">Click here to enter text.</a>	Academic Standing: <a href="#">Click here to enter text.</a>
Holds: <a href="#">Click here to enter text.</a>	Reinstatement: <input type="checkbox"/> Approved <input type="checkbox"/> Denied

NOTES: