



Office of the Registrar  
 105 Whichard Building  
 Greenville, NC 27858  
 252-328-6524  
 FAX: 252-328-4232  
 Email: [Regis@ecu.edu](mailto:Regis@ecu.edu)  
<http://www.registrar.ecu.edu/>

## Request for Schedule Reinstatement

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

TO WHOM IT MAY CONCERN:

Last 4 digits of SSN or ECU ID: **B**

**is regularly attending** my class. I support his/her enrollment in my class.

<u>COURSE</u>	<u>NUMBER</u>	<u>SECTION</u>	<u>INSTRUCTOR'S SIGNATURE</u>	<u>DATE</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Please return completed form to the Office of the Registrar, 105 Whichard Building.**

Thank you.