WEST VIRGINIA STATE UNIVERSITY

Application for Readmission

INSTRUCTIONS: Please complete form and return to Registrar's Office, 128 Ferrell Hall, P. O. Box 1000, WVSU, Institute, WV 25112.

Readmission Procedure: The University accepts applications for readmission for those in good academic standing at any point prior to the close of the regular registration period*. ***Please note:*** Students not in good academic standing must make application for readmission at least one month prior to the session for which readmission is sought and must be approved by the Academic Affairs.

*If you have attended any other institutions since your last enrollment at WVSU, please make your request through the Admissions Office.

Term you plan to re-enroll: **Fall** ☐ **Spring** ☐ **Summer** ☐ **Year:**

Student Information

Full Name: *(first)* *(middle)* *(last)*		
WVSU A# or Soc. Sec.#:	D.O. B.: *(mo/dy/year)*	
Address:		
City, State, Zip:		County:
Email:	Phone:	Cell:
If previously enrolled at WVSU under a different name, list here:		
In your last term of attendance were you classified as a W.Va. resident? ☐ Yes ☐ No		
Gender: ☐ Male ☐ Female		
Ethnic Status: ☐ White Non-Hispanic ☐ Black Non-Hispanic ☐ Hispanic ☐ Asian/Pacific Islander ☐ Native American		

Education/Degree Information

High School:	H.S. Graduation Date:
Last date of enrollment at WVSU:	
Select readmission student type: ☐ Bachelor's Degree ☐ Online Bachelor's Degree ☐ Second Bachelor's Degree ☐ Post Graduate ☐ Online Post Graduate ☐ Transient ☐ Non-Degree	
Indicate degree you will pursue:	Major:

List all colleges you have attended and degrees earned: (please request that each college send an official transcript to our office) Incomplete and/or untrue information may result in your readmission being denied and/or cancelled.

Institution Name	City	State	FROM-Mo./Yr.	TO-Mo./Yr.	Degree(s) Earned

I certify that all statements in this application are complete and true and give WVSU permission to use the information for internal statistical and reporting purposes. I further understand that any willful misrepresentation of information given in this application may be grounds for denial of my readmission or dismissal.

Student Signature: _____ Date:_____

For Office Use Only

Attempted Hours	Passed Hours	Quality Points	Deficiency	GPA

Request Denied Permission granted under the conditions stated below

_____ _____

Vice President for Academic Affairs **Date**

Conditions of Readmission: _____

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CLEARANCES: CASHIER _____ FINANCIAL AID _____ Distribution—White: Registrar Yellow: Acad. Affairs Pink: Student

Rev. 7/2/2018