

FINDLAY

THE UNIVERSITY OF FINDLAY

APPLICATION FOR RE-ADMISSION

Graduate & Professional Studies Office ~ 1000 North Main Street ~ Findlay, Ohio 45840-3695
419-434-4600 ~ 1-800-558-9060

I am applying for re-admission for the academic year _____ - _____, starting 1st sem. _____
2nd sem. _____. I wish to attend classes on a full time _____ part time _____ basis.

Name _____ Social Security # _____

Permanent Address _____
(street) (city/state/zip)

Telephone _____ Marital Status _____

Major _____ E-Mail Address _____

I previously attended The University of Findlay from _____ to _____

Reason for leaving The University of Findlay* _____

*** If you were dismissed for academic or disciplinary reasons, please use the reverse side of this application to write a statement supporting your application for readmission. This statement should include your reason for desiring to return and any activities or achievements which you think make you better qualified to do college work at this time.**

Since leaving The University of Findlay, I have ____ have not ____ attended another college or university.

If you have enrolled elsewhere, please provide the name(s) of the institution(s) and the dates of attendance.

(name of college or university) (dates of attendance)

*Official transcripts from all institutions attended since leaving UF should be sent to:
Graduate and Special Programs ~ 1000 North Main Street ~ Findlay, Ohio 45840-3695*

If readmitted, I plan to live: residence hall ____ home ____ other _____
(Students under 22 years of age must live on campus unless living at home.)

The information provided above is accurate and complete:

Signature _____ Date _____