

APPLICATION FOR READMISSION

(Please print or type)

Name: _____ Maiden Name: _____
Last Name Middle

Name while at Averett: _____ Sex: _____ Male _____ Female

Mailing Address: _____
Street or PO Box City State Zip Code

Billing Address: _____
Street or PO Box City State Zip Code

County of Residence: _____ Country of Residence: _____ Local Phone: () _____

Employer: _____ Work Phone: () _____ Perm Phone: () _____

Email: _____ Fax Number: () _____ Social Security #: _____

Check One:
_____ U.S. Citizen
_____ Resident Alien/Permanent U.S. Resident #
_____ Non-resident Alien (Foreign National) Country of Citizenship, if not U.S. _____

Did you leave Averett under social suspension? No Yes For how long? _____
(term/year to term/year)

Did you leave Averett under academic suspension? No Yes For how long? _____
(term/year to term/year)

Have you attended other colleges since attending Averett? No Yes

Name of College _____ From _____ To _____

Name of College _____ From _____ To _____

Please check ALL that apply:

Did you graduate from Averett? No. Year & Term of withdrawal _____ Yes. What year? _____

When I last attended Averett, I was a: Special Student (no degree objective)
 Degree Seeking Student Full time Part time

When I re-enter, I plan to be: Special Student (no degree objective) Degree Seeking Student
 Teaching Licensure Certification Audit
 Recertification Classes IDEAL Program

When do you plan to re-enter Averett? Fall Spring Summer Full time Part time

Residence Plans: On Campus Resident Commuter

Anticipated Major: _____ Occupational/Professional Objective: _____

If Education is your chosen major, check which grade level:

Elementary Education (Pre K-6) Secondary (6-12) If Secondary, what subject area? _____

I certify that I have read the information on the reverse side of this application and that all of the information contained in this application is complete and correct.

Signed: _____ Date: _____

DO NOT WRITE BELOW THIS LINE. FOR OFFICE USE ONLY.

Date notification sent to Dean of Students _____ Clearance received: _____

Date notification sent to Business Office _____ Clearance received: _____