



ADELPHI UNIVERSITY APPLICATION FOR RE-ADMISSION

FOR STUDENTS WHO HAVE BEEN AWAY FOR THREE YEARS

PERSONAL DATA (Please type or print clearly)

Mr. Mrs. Miss Ms. _____
(Last) (First) (Middle)

Other name(s) that have been used on transcripts _____

Street Address _____
Apt. number, if applicable

City/Town _____ State _____ ZIP _____

Home Phone _____ Email _____

Date of Birth Male Female Fax Number _____
(Mo) (Day) (Yr)

Were you born in the United States? Yes No If no, what is your country of birth? _____
 What is your country of citizenship? _____

Are you a citizen of the United States? Yes No If no, are you a permanent resident of the United States? Yes No

If you are a permanent resident, please indicate resident alien number _____

How long have you lived in the United States? _____

Have you ever been charged with, convicted of, or pled guilty or no contest to a felony or misdemeanor charge? (An affirmative response will not automatically prevent admission, but any omission or falsification is grounds for denial or rescission of admission, or expulsion.)
 Yes No If yes, provide an explanation. _____

CLASSIFICATION

When did you attend Adelphi? _____

What was your major? _____

For what program are you seeking admission? _____

For what semester do you want to be re-admitted? _____

Why did you leave Adelphi? _____

PREVIOUS EDUCATION

List in chronological order all educational institutions attended since your departure from Adelphi. Please attach a description of your activities since you left Adelphi. Copies of transcripts must be supplied.

College/University	Street/City/State	Dates Attended	Degree/Diploma
		TO	
		TO	

Other Activities	Description	Dates Participated	Position Held
		TO	
		TO	
		TO	

Have you ever been suspended, dismissed, expelled, or required to withdraw from any high school or college for academic or disciplinary reasons?
(An affirmative response will not automatically prevent admission, but any omission or falsification is grounds for denial or rescission of admission, or
expulsion.) Yes No *If yes, provide an explanation.* _____

SIGNATURE

Signature

Date

I authorize Adelphi University to contact previous schools attended to obtain information in connection with this application.

Dean's Signature

Date

Dean's Comments

FOR OFFICE USE ONLY						
E _____	Program _____	Maj _____	Deg _____	CC _____		
RES _____	HS Code _____	Coll. Code _____	Ath _____	CC App _____	SPEC PROG _____	