



Application for Re-enrollment

Students who have not attended Rochester College for one or more semesters and wish to return must complete this application and submit it to the admissions office. No application fee is necessary. **If you were suspended or dismissed for academic reasons, you must appeal to the Academic Life Committee and be removed from suspension before submitting this application.**

Name: _____

Street Address and/or P.O. Box: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____ Social Security Number: _____

Last term attended at RC: _____ Term of re-enrollment: Fall 20____ Spring 20____

Intended Major: _____

Housing arrangements upon return to RC: Residence Hall _____(submit housing request)

Parent's _____ Other _____

College, university of other educational institutions you have attended since leaving RC:

INSTITUTION	LOCATION	DATES ATTENDED	HOURS COMPLETED	GPA

Has any college dismissed or requested you to withdraw since leaving RC? ____ If yes, attach explanation.

Why are you requesting to re-enroll at RC? _____

I affirm that the information on this application for re-enrollment is complete and correct to the best of my knowledge. Further, I agree to familiarize myself with the codes of student conduct as outlined in the college catalog and the student handbook, and will commit myself to the ideals, policies and regulations to which I will be held accountable for the duration of my study at Rochester College.

Signature _____ Date _____

The above student has applied for re-admission to Rochester College. Please indicate approval or denial in the following area. Explain denial or if there are conditions to be met before admittance. You may use the back. Please return to Larry Norman when completed.

	Cleared to return?	Signature	Date
Academic Services	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Student Development	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Business Office	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

CAMS Verification: Holds: _____ RC Cumulative GPA: _____ Academic Status: _____

Decision: _____ Verified by: _____ Date: _____