

Admissions Record
Date Accepted _____
By _____
Mat. Fee Recv'd _____

 **TAYLOR UNIVERSITY**
APPLICATION FOR READMISSION

Student No. _____
Adm. Status _____
Hours Trans _____
GPA Hrs. Trans. _____

PERSONAL INFORMATION (please print)

Legal name	Last	First	Middle or maiden name, if married	Social Security Number
Permanent home mailing address			City	State
Temporary home mailing address			City	State
Home telephone number			Temporary telephone number	
Last date for temporary address and phone number _____				

Male Female Date of birth _____ / _____ / _____ Date last attended Taylor _____

Marital status: Single Married Widowed Divorced Spouse's name _____

ENROLLMENT INFORMATION - Term of anticipated enrollment:

Fall • September Interterm • January Spring • February

Summer • Session One Summer • Session Two Summer • Session Three

ENROLLMENT STATUS

Readmit Probationary readmit

Do you plan to commute? Yes No

Expected classification Freshman Sophomore Junior Senior

Intended major _____

DEGREE AND CURRICULUM • Please check the degree and the curriculum you plan to follow.

Degree Options	Curriculum Options
<input type="checkbox"/> AA Associate of Arts	<input type="checkbox"/> Prelaw
<input type="checkbox"/> BA Bachelor of Arts	<input type="checkbox"/> Premedical Technology
<input type="checkbox"/> BS Bachelor of Science	<input type="checkbox"/> Premedicine
<input type="checkbox"/> BM Bachelor of Music	<input type="checkbox"/> Teacher Education
<input type="checkbox"/> UNDCL Undeclared/Pre-major	<input type="checkbox"/> Environmental Science
	<input type="checkbox"/> Systems Analysis

Why do you wish to return to Taylor? _____

Were you dismissed from Taylor? Yes No

If yes, for what reason were you dismissed? Academic Social Financial

What has changed to warrant your return? _____

If no, what was your reason for withdrawing? _____

Is there any information you wish to share that would assist us in evaluating your readmission application? _____

List school(s) attended since leaving Taylor and the dates of attendance. You must request official transcripts be sent from each school.

FAMILY INFORMATION

Legal guardians:

		()
Father's name	Employer and job title	Work telephone
		()
Mother's name	Employer and job title	Work telephone

Do you: Live with both parents?
 Live with one parent? Which one? Mother Father

First and last name of custodial parent's spouse (if applicable)

Other living situation? Please explain on a separate sheet of paper.

Person to be notified in case of emergency other than parent (MUST BE COMPLETED!)

				()
Mailing address	City	State	Zip	Telephone number

AFFIRMATION

It is my desire to maintain the expectations of Taylor University. I have read the Life Together Covenant and accept these responsibilities as a participant in the Taylor community. I hereby certify that all information provided is accurate and correct.

Signed Date

For Office Use Only	
*Approved by:	
Records Office _____	Date _____ Schedule available <input type="checkbox"/> Yes <input type="checkbox"/> No
Academic Dean _____	Date _____ Comments _____
Student Development _____	Date _____ Housing available <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Office _____	Date _____ Balance _____ Credit _____ Debit _____
Comments _____	
Financial Aid Office _____	Date _____ Comments _____
*The Admissions Office will make the final decision based on a composite of all responses along with enrollment considerations.	