

University of South Alabama
Undergraduate Readmission Application (U. S. Citizens)

University of South Alabama
Office of the Registrar
Meisler Hall, Suite 1100
Mobile, AL 36688-0002



Phone - (251) 460-6215
Fax - (251) 460-7738
Email – registrar@usouthal.edu

PLEASE READ BEFORE COMPLETING APPLICATION

- **Returning** applicants are students who were previously enrolled in courses at USA and who have been absent from USA for at least one semester. (Exception: A readmission is not required for undergraduate students enrolled spring term that do not attend summer.) **Transient** students **must reapply each term** and request an official Transient Approval for each term.
- If a returning student has attended any other college(s) since last enrolled at USA, an official transcript from each college or university attended is required (student must request the transcript). The student must have cumulative grade-point average of at least 2.0 ('C') as computed by USA on all work attempted at the previous college(s). The student must also be in good standing and eligible to return to the last institution attended.
- Returning students are considered for readmission on the basis of their previous record at USA. If a student was suspended or dismissed from USA, the suspension or dismissal must be cleared in order for the student to return.

IMPORTANT INFORMATION FOR READMISSION

- **If you do not register for your original application term**, you must complete another application for the term you plan to readmit.
- **Financial Aid Applicants:** You must be a degree-seeking student at USA. You cannot readmit or register as non-degree seeking and receive financial aid.
- **Academic Bankruptcy/Forgiveness:** Academic Bankruptcy is available only to eligible undergraduate students (without a bachelor's degree) who have not been enrolled at USA for one or more calendar years. Academic bankruptcy must be declared before or during the term of re-entry. For more information, contact the Registrar's Office at (251) 460-6215.
- **Veterans:** If you are a veteran, please contact the Office of Veteran Affairs (251) 460-6230 for benefit information.

COMPLETE THE APPLICATION INFORMATION ON THE REVERSE SIDE.
BE SURE TO SIGN THE BOTTOM OF THE APPLICATION.

PRINT or TYPE all information requested.
USE BLACK INK ONLY

UNIVERSITY OF SOUTH ALABAMA

Undergraduate Readmission Application

LEGAL NAME (PLEASE PRINT)			STUDENT NUMBER		
Last _____ First _____ Middle _____			J00 _____		
Name Prefix: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other _____			Name Suffix: (Ex. Jr. Sr., III, etc.) _____		
Preferred First Name: _____			Maiden/Other Name _____		
Mailing Address: _____					Apt. _____
City: _____		State _____		Zip _____ County _____	
State of Legal Residency _____			County of Legal Residency _____		
Phone Number (____) _____		Check One: <input type="checkbox"/> Current <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Pager			
Secondary Phone (____) _____		Check One: <input type="checkbox"/> Current <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Pager			
Email Address _____					

GENDER: Female Male Date of Birth: ____ / ____ / ____

SOCIAL SECURITY: _____ (Your SSN is optional as an applicant to USA and is used for identification purposes only; however, the SSN is required when applying for financial aid.)

U.S. CITIZEN: (**NOTE:** International or Permanent Resident must reapply through the Admissions Office for International Students, not the Registrar's Office)

ETHNIC BACKGROUND Hispanic/Latino Not Hispanic/Latino

RACE Amer Indian/Alaska Native Asian Black or African American White Native HI/Pacific Islander
(Information needed for Department of Education reporting use only.)

MARITAL STATUS Married Separated Unmarried Widowed

TERM/YEAR RETURNING TO USA: (Mark one term only.)
 Fall (August) Spring (January) Summer (May/June) Year _____

<p>RETURNING COLLEGE/MAJOR</p> <p><input type="checkbox"/> Allied Health <input type="checkbox"/> Computer/Information Sci</p> <p><input type="checkbox"/> Arts and Sciences <input type="checkbox"/> Education</p> <p><input type="checkbox"/> Mitchell Business <input type="checkbox"/> Engineering</p> <p><input type="checkbox"/> Continuing Education <input type="checkbox"/> Nursing</p> <p>PLANNED MAJOR _____</p> <p>PREPROFESSIONAL PROGRAM _____</p>	<p>RETURNING ADMIT TYPE</p> <p><input type="checkbox"/> Returning (Degree seeking)</p> <p><input type="checkbox"/> Second Bachelor's Degree</p> <p><input type="checkbox"/> Transient (Non-Degree)(Need Official Transient Approval)</p> <p><input type="checkbox"/> Unclassified (Non-Degree) (Need official proof of degree)</p> <p><input type="checkbox"/> Audit Only</p>
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PREVIOUS COLLEGE INFORMATION (since last attending USA)
Please Note: Failure to report all institutions attended will be cause for cancellation of the readmission process or result in dismissal from the University. Please attach a separate page if additional space is needed.

College Name	College City/State	List Specific Dates of Attendance		Degree Earned
		From (Mo/Yr)	To (Mo/Yr)	

APPLICANT'S SIGNATURE

I certify that the information above is true and complete. I understand that withholding information requested, with the exception of information designated as optional, or giving false information may make me ineligible for readmission and enrollment.

Signature: _____ Date: _____

NOTE: It is the responsibility of the applicant to request required official documents to be mailed directly from the institution to the Office of the Registrar by the application deadline.

REGISTRAR USE ONLY

Last Term: _____ Class: _____ Student Type: _____ Residency N / S / O / A County Code: _____

Previous Program: Major: _____ / _____ Major (2): _____ Minor: _____ Concentration: _____

Catalog Term: _____ Holds: _____ GPA: _____ TCE Verified: _____

Acad Status: _____ Admit Type: _____ Decision: _____ Admit Date: _____ SGASTDN Override: _____ SHAINST: _____