



APPLICATION FOR READMISSION TO UNDERGRADUATE STUDY

DIRECTIONS: Complete and submit this form for readmission to the SCPS Office of Admissions, 145 4th Ave., Rm. 219, New York, NY 10003. This application is to be used only if you are requesting readmission to the SCPS programs in which you were previously registered. All other applicants must use the regular application for admission. If you attended another institution since leaving NYU, you must also submit an official transcript from that institution and a \$45 application fee (check or money order, payable to New York University). Students may not be readmitted with outstanding credentials.

1. PERSONAL INFORMATION SEX: M F
 LEGAL NAME: LAST (FAMILY) _____ FIRST _____ MIDDLE INITIAL _____

OTHER NAMES THAT APPEAR ON PREVIOUS SCHOOL RECORDS _____

ADDRESS (NUMBER AND STREET) _____ Apt. # _____ HOME PHONE _____
 () _____

CITY _____ STATE _____ ZIP CODE _____ WORK PHONE _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH (MO/DAY/YR) _____ PLACE OF BIRTH (CITY AND STATE - INCLUDE COUNTRY IF NOT U.S.) _____

EMAIL: _____ FAX: _____

IS ENGLISH YOUR NATIVE LANGUAGE?
 Yes No If "No," please indicate your primary language: _____ Year entered U. S. _____

INDICATE CITIZENSHIP STATUS:
 U.S. Citizen Permanent resident Refugee Other If "Other," please indicate country of citizenship _____

IF NOT A U.S. CITIZEN, YOU MUST INDICATE
 U. S. VISA type _____ Date VISA issued _____ Year entered U. S. _____ Alien Registration number, if any _____

(OPTIONAL) HOW WOULD YOU DESCRIBE YOURSELF?
 Caucasian, white (non-Latino) Puerto Rican
 African-American Other Latino
 Other black Asian or Pacific Islander (including Indian subcontinent)
 American Indian or Alaskan native
 Other _____

2. FILING STATUS DATE OF READMISSION: Fall _____ Spring _____ Summer _____ Year _____

CLASSIFICATION: Full time (12 credits or more) Part time (less than 12 credits)

OFFICE USE
 AA
 BA
 BS
 BS
 AAS

PROGRAM APPLICANT WISHES TO ENTER:
 Educational Options (undecided) (UNDC) Bachelor of Science Healthcare Management (HSPP)
 Associate in Arts (Liberal Arts) (LIBA) Bachelor of Science Real Estate (REBS)
 Bachelor of Arts (Liberal Arts). Applicants must have at least Associate in Applied Science (Business) (BUSN)
 30 transferable credits—grade "C" or better. Associate in Applied Science (Basic Health Science) (BHSC)
 Humanities (HUMN) Associate in Applied Science (Diagnostic Medical Sonography) (SONO)
 Social Sciences (SOCS) Associate in Applied Science (Health Administration) (HADM)
 Bachelor of Arts in Public Administration Associate in Applied Science (Human Services) (HSER)
 Bachelor of Arts in Technical Writing Associate in Applied Science (Physical Therapist Assisting) (PTAS)
 Bachelor of Science Communications Technologies (COTE)
 Approximately how many credits (grade "C" or better) have you received from another accredited college/university? _____

3. PRIOR APPLICATIONS TO NEW YORK UNIVERSITY
 To which Division did you previously apply? _____ When did you apply? _____
 Date of attendance: From: _____ To: _____
 Last semester of attendance at SCPS: _____

4. FINANCIAL AID

Do you intend to apply for financial aid?
Yes No

Does your company offer tuition reimbursement?
Yes No

If yes, how much?
Partial Full

5. SECONDARY SCHOOLS

NAME OF SCHOOL

LOCATION (CITY, STATE)

DATES ATTENDED

DATE OF GRADUATION

List all secondary schools you have attended (grades 9 through 12). List most recent schools first.

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

You must have official transcripts or GED score sent immediately.

I do not have a high school diploma or a General Equivalency Diploma (GED)

OFFICE USE ONLY

CEEB CODE

6. COLLEGES

List all colleges or universities you have attended including those that you have attended since leaving SCPS (list most recent school first). **You must have an official transcript sent from each institution immediately.**

NAME OF SCHOOL

LOCATION (CITY, STATE)

DATES ATTENDED

NUMBER OF CREDITS EARNED*

DEGREE AND DATE OF GRADUATION

1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

*Grade "C" or better.

CEEB CODE 1.

2.

3.

7. ACADEMIC DISMISSAL

Have you been suspended or dismissed from another college or university within the past year?

Yes No

If yes, please explain:

8. EMPLOYMENT HISTORY

List your most recent business, professional, and military experience.

TYPE OF WORK PERFORMED

NAME AND ADDRESS OF EMPLOYER

DATES

_____	COMPANY NAME _____ STREET CITY STATE ZIP	_____
_____	COMPANY NAME _____ STREET CITY STATE ZIP	_____

9. REASON FOR WITHDRAWAL

Briefly describe your reasons for withdrawing from McGhee. How do you feel you are now prepared to resume your studies in McGhee? (Attach additional sheets if necessary)

10. SIGNATURE

My signature below indicates that all the information contained in this application is complete and correct. I am aware that any falsification in the completion of this application form, either by error or omission, may result in my being denied acceptance by New York University or may result in disciplinary action.

SIGNATURE _____

DATE _____