



Please print (in ink) or type, and do not write in shaded areas. Return this form to 230 Jesse Hall, Columbia, MO 65211-1300.

INSTRUCTIONS (READ CAREFULLY)

- REQUEST FOR RE-ADMISSION** for **ALL** undergraduate programs should be sent to the Director of Admissions, 230 Jesse Hall, Columbia, MO 65211-1300. Please note, if you have been enrolled in courses at MU within the past academic term, you may not need to complete this form. If you have never been an admitted degree-seeking undergraduate, complete the transfer student application or the first-time college application.
- Applicants must submit official transcripts for **ALL** college work done since last attending MU.
- FINANCIAL AID:** Questions should be directed to the Office of Student Financial Aid, 11 Jesse Hall, 573-882-7506, or 1-800-225-6075 (in Missouri, Kansas and Illinois).
- HOUSING:** Student housing information and applications for university-owned residence halls are available at reslife.missouri.edu.
- OUT-OF-STATE APPLICANTS:** It is your responsibility to apply and register under the proper residence and to pay the proper tuition/fees. A pamphlet giving detailed information on tuition and residency rules may be obtained from the Residency Office, 230 Jesse Hall.

PART I — PERSONAL INFORMATION

- Legal name
First _____
Middle _____
Last _____
Former or other name _____
- Social Security Number (optional) _____
- Date of birth (MM/DD/YY) _____
- Place of birth _____
City _____ State _____
Country _____
- Citizen of the U.S.? Yes No
If no, what country? _____
- If "No" above, do you have permanent resident (P.R.) status in the U.S.? Yes No *If yes to P.R. status, please enclose a copy of green card.*
- Are you a Missouri resident? Yes No
Not Sure? For more information about tuition and residency, contact the Residency Office, 230 Jesse Hall, 573-882-3852.
- Gender Male Female

We are required by the federal government to solicit certain demographic information to meet federal reporting requirements. The information in questions 9a and 9b will not be used in a discriminatory manner. It is not required, but it must be completed to be considered for some scholarship programs.

- What is your ethnicity?
 Hispanic or Latino Non-Hispanic or Non-Latino
- What is your race? Please check one or more that apply:
 American Indian or Native Alaskan
 Asian (includes Chinese, Filipino, Japanese, Korean, Thai, and Asian Indian)
 Asian (Other) Black or African-American
 Hawaiian/Pacific Islander White/Caucasian
- Are you currently or have you ever been a veteran of the U.S. armed forces?
 Yes No
- Permanent address and telephone number
This address will be used for all university correspondence prior to your first registration.
Number and street _____
(or RFD, apartment or box number)
City _____
County _____
State _____ ZIP _____ Country _____
(Area code) telephone number _____
(Area code) cell phone number _____
Student e-mail address _____

- Name of Parent Spouse Guardian/Other
(check one)
First _____
Middle _____
Last _____
- Address of Parent Spouse or Guardian/Other
(check one)
Number and street _____
(or RFD, apartment or box number)
City _____ County _____
State _____ ZIP _____ Country _____
(Area code) telephone number _____

PART II — ACADEMIC INFORMATION

- Previously enrolled at MU or in MU extension courses?
 Yes No Year: _____
- Ever enrolled in online or independent study courses through MU?
 Yes No Year: _____
Academic program desired (check one)
 Agriculture Arts & Science Business
 Education Engineering Natural Resources
 Human Environmental Sciences Journalism
 Nursing Health Professions Social Work
Desired undergraduate academic major/plan?

Are you submitting this application in order to apply for graduation or transfer a course(s) to MU to complete your degree requirements? Yes No

Term of expected entrance (check one)

Fall Spring Summer Year: _____

16. For general studies and nursing students only:

a. Is this an evening-only MU Direct program? Yes No

b. Is this an online Center for Distance and Independent Study program? Yes No

17. Name and location of all colleges attended, dates of attendance and degrees earned since last enrollment at MU (if none, enter "none"). If currently enrolled, indicate in date space. List schools beginning with the most recent. Failure to indicate colleges or universities in which you have enrolled will void your admission.

Name of college _____

Location _____

(City and State)

Dates of attendance _____

Degrees earned _____

Degree dates _____

Name of college _____

Location _____

(City and State)

Dates of attendance _____

Degrees earned _____

Degree dates _____

18. Legal signature (in ink). I authorize the University of Missouri to maintain all my records under this name.

SIGNATURE

DATE

No transcript can be accepted directly from the student; admission status cannot be determined until complete credentials are on file in the Admissions Office. **FAILING TO COMPLETE THIS FORM FULLY OR GIVING MISINFORMATION CONCERNING PREVIOUS ENROLLMENT IN OTHER COLLEGES OR UNIVERSITIES WILL VOID YOUR ADMISSION.** All transcripts become the property of the university. Because of limited enrollment and/or higher minimum standards, the University of Missouri does not guarantee acceptance to specialized or professional programs.

COMPLETE ALL ITEMS AND RETURN THIS FORM TO:

Director of Admissions
University of Missouri
230 Jesse Hall
Columbia, MO 65211-1300
Fax: 573-882-7887

Some information requested is required by Title VI of the Civil Rights Act of 1964, Title XI of the Higher Education Amendments of 1972 and section 504 of the Rehabilitation Act of 1973 and is for the purpose of reporting to Federal Compliance Agencies concerning equal education opportunity, in order to keep the records required by the federal government, and to assure that there will not be discrimination on the basis of race, color, religion, handicap, national origin or sex.

STATEMENT-DESIRED DIVISION (For office use only)

I recommend that: The permit be issued The permit be held for final grades
 The request be denied

ACADEMIC UNIT DEAN SIGNATURE/STAMP

UNIVERSITY OF MISSOURI

MISSOURI

Former Student
Request for Re-admission
for Undergraduate Studies
University of Missouri



RETURN TO:

Director of Admissions
University of Missouri
230 Jesse Hall
Columbia, MO 65211-1300