Capital University OFFICE OF THE REGISTRAR

YOCHUM HALL PHONE: 614.236.6150 REGISTRAR@CAPITAL.EDU

APPLICATION FOR READMISSION AS A DEGREE CANDIDATE

Readmission must be approved by the Registrar in consultation with the Associate Provost and is subject to clearance from the Finance Office. Students applying for readmission who have been suspended must have the approval of the Academic Success & Student Affairs (ASSA) committee. Individuals who have been dismissed from the university must also have the approval of the Provost. The readmission process must be completed prior to the first day of classes in which the student wishes to re-enroll. Students are subject to the degree requirements in effect at the time of readmission.

Readmit Term (e.g. Fall 2023): ID# or SSN:			
Previou	Previous Name(s):		
Cite	Chata	Zip Code	
·		Zip Code	
	ony? □ Yes* □ No	a statement of explanation	
1 0	9	_	
☐ Yes ☐ No Office of Residence Life of your int	ention to live off or on camp	us after your application	
are attending since leaving colleges and universities)	Capital:		
	Dates of Attendan	ce	
	Dates of Attendan	ce	
	Dates of Attendan	ce	
	City Cell Tor pleaded guilty to a felo Did you gra *If yes, are you e programs from Adult & Conte e programs from Traditional U Yes	City State City State Cell Office For pleaded guilty to a felony?	

Note: All official transcripts must be submitted to the Office of the Registrar. To assure proper course scheduling, it is imperative that all transcripts be received, preferably before term of readmission, but not later than pre-registration for the subsequent term.

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Are you planning to receive Financial Aid? \square Yes \square No	
If you would like to be considered for any need-based financial aid, you must not in good academic standing when you left Capital, you may need to appe Please check with the Financial Aid Office to determine if any additional docu	al to receive your merit-based funds upon your return.
Additional Information:	
Any student previously on academic probation , suspension must include a statement with this application answering the	
1. In what activities have you engaged since you last atte	ended Capital?
2. Why do you feel you are now ready to continue your d progress? I hereby certify the information supplied above is correct.	legree objectives and demonstrate academic
Student Signature	Date
READMISSION APPROVALS:	
Financial Aid Office	Date
Student Accounts Office	Date
Department Chair/Dean*	Date
*Department Chair/Dean signature is only required for undergraduates majo Studies or Social Work; or students re-entering one of our Graduate Programs	
FINAL APPROVAL:	
Bulletin Year Assignment	
Associate Provost	Date