

SIMPSON COLLEGE

APPLICATION FOR READMISSION FOR _____ (Term and Year)

Name: _____ Parent(s) _____
Address: _____ Address: _____
CSZ: _____ CSZ: _____
Phone: () _____ Spouse: _____
Male _____ Female _____ Single _____ Married _____
Date of Birth: _____ Anticipated Degree Date: _____
SSN: _____ Religious Preference: _____
Previous Dates of Attendance: _____

I plan to enroll full time _____ I will need campus housing: _____
I plan to enroll part time _____ I plan to commute to campus: _____

1) Reason for leaving Simpson College: _____

2) I am returning to complete:
Bachelor's Degree with major in: _____
Post-baccalaureate certificate in _____
Teacher Certification/New endorsement in _____
Other _____

3) Activities/experiences since leaving Simpson (use back, if needed):

4) List all colleges that you have attended since leaving Simpson. Arrange to have final, official transcripts sent to the Simpson Registrar's Office.

5) Use the back of this form to give information to be considered concerning readmission.

I certify that the information given here is correct and complete. I have read and/or am familiar with the Simpson College catalog in effect at the time of readmission and the academic and social regulations contained therein, and accept these as appropriate for guiding my future relationship with Simpson College.

Applicant's Signature _____ Date _____
Business Office Approved: _____ Denied: _____ By: _____ Date: _____
Perkins Loan Office Approved: _____ Denied: _____ By: _____ Date: _____