

## Undergraduate Application for Readmission

Completed applications must be submitted to the Registrar's Office in person, by fax(906-487-3343) or email ([registrar@mtu.edu](mailto:registrar@mtu.edu))

MTU Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Last name: \_\_\_\_\_ First: \_\_\_\_\_ Middle initial: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Readmission Term:      Fall \_\_\_\_\_  
                                                *Year*

Spring \_\_\_\_\_  
                                                *Year*

Summer \_\_\_\_\_  
                                                *Year*

Last term enrolled at Michigan Tech:

Fall \_\_\_\_\_  
                                                *Year*

Spring \_\_\_\_\_  
                                                *Year*

Summer \_\_\_\_\_  
                                                *Year*

Academic standing at time of separation:

Major while enrolled at Michigan Tech: \_\_\_\_\_

Major to which you are applying (requires departmental approval): \_\_\_\_\_

Degree for which you are reapplying:

Have you attended another institution while absent from Michigan Tech?  
(If so, please have the institution(s) send a copy of the final transcript to the Transfer Service Office at Michigan Tech)

Institution name: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of attendance: From: \_\_\_\_\_ To: \_\_\_\_\_

Institution name: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of attendance: From: \_\_\_\_\_ To: \_\_\_\_\_

Have you been convicted of a felony, or have you been arrested for a crime for which criminal charges are pending since you last attended Michigan Tech?

*(If yes, please provide a detailed explanation on a separate sheet of paper.)*

*I certify that I am the above named person and the information I have provided is accurate.*

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Department Use Only

Department approval: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar's Office approval: \_\_\_\_\_ Date: \_\_\_\_\_