



# Readmission Application

Intended Term of Readmission: \_\_\_\_\_ Year: \_\_\_\_\_ Student ID (if known): \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Maiden or Former name \_\_\_\_\_ SSN # (Optional) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address1 \_\_\_\_\_ Address2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Country \_\_\_\_\_

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

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

U.S. Citizen? Yes No If no, Country of Citizenship and Visa Status: \_\_\_\_\_

Last Attended Term at KU \_\_\_\_\_ Year \_\_\_\_\_ Legal Resident of PA? Yes No

Are you planning on using Veteran Benefits for your Tuition? Yes No

List all colleges/universities you attended since your last attendance at KU?

Institute Name \_\_\_\_\_ Year \_\_\_\_\_ Semester \_\_\_\_\_

Institute Name \_\_\_\_\_ Year \_\_\_\_\_ Semester \_\_\_\_\_

Institute Name \_\_\_\_\_ Year \_\_\_\_\_ Semester \_\_\_\_\_

Will you be participating as an Athlete at KU? Yes No

Are you applying for Academic Forgiveness? Yes No

I certify that the above statements are correct and that I have answered all applicable questions. I further certify that, if accepted, I will abide by the conduct standards and regulations of Kutztown University. Any misrepresentation of facts will be cause for refusal or cancellation of my admission to Kutztown University.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_