



Office of the Registrar - Division of Student Affairs Readmission & Reinstatement Application

(Choose one semester and indicate year) <input type="checkbox"/> Fall <input type="checkbox"/> Spring Year: 20____	\$20.00 Application Processing fee
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Note: The City University of New York does not discriminate on the basis of race, religion, sex, age, creed, color, national origin, physical or mental disability, sexual orientation, marital status, citizenship status, or veteran status.

STEP 1: PLEASE PRINT CLEARLY										
CUNYfirst EMPL ID# or SSN #										
Last Name _____	First Name _____	Middle Initial _____	Name while in Attendance (if different) _____							
Date of Birth: ____/____/____										
Current Mailing Address: Street _____			Apt No _____	City _____	State _____	Zip Code _____				
Phone No (____) _____ - _____				E-mail address: _____						
IMPORTANT										
<ul style="list-style-type: none"> If you have attended another college since leaving LaGuardia, please provide official transcripts from the other college(s) to the Office of Admissions in room C-102 for evaluation. If you wish to change your Name, DOB, Social Security Number or Address, attach a Personal Data Change form to this application. If you wish to change your major, attach a Change of Major form to this application. All readmitted students are required to re-file the New York State Residency application. 										
STEP 2: Go to Student Financial Services, room C-107, to review your financial aid status with a Financial Aid Specialist.										
<i>Stu. Fin. Services Signature:</i> _____							<i>Date:</i> ____/____/____			
STEP 3: Go to Bursar's window, room C-110, to pay the application processing fee.										
<i>Bursar's Signature:</i> _____							<i>Date:</i> ____/____/____			
STEP 4: Return the completed form to the Registrar's Office in room C-107.										
I have met with a Financial Aid Specialist and I am aware that I am responsible for paying my tuition and fees. I understand that my residency status will be set to out of state unless the New York State Residency application plus the proper documentation are submitted.										
Select the section below that applies to you:										
__ Readmission. I have not registered for classes or received grades for a least two semesters.										
__ Reinstatement. I was placed on academic probation or suspension when I last attended LaGuardia.										
I hereby certify that: I read, fully understand and accept the above statements.										
<i>Student's Signature:</i> _____							<i>Date:</i> ____/____/____			
<i>Signature from Pick-up:</i> _____							<i>Date:</i> ____/____/____			

Office use only	Readmission & Reinstatement Status	Session: I__ II__	Added Registration
Academic Standing Status: Good <input type="checkbox"/> PRB1 <input type="checkbox"/> PRB4 <input type="checkbox"/> DCH/SUSP <input type="checkbox"/>	Accepted: ____ Non-Degree: ____ AFP: ____ Acad. Appeal: ____	Appt. > 30 credits ____	
Cleared from Disciplinary Suspension: _____	Rejected: ____ Last Term: ____ GPA: ____ Units Taken: ____	< 30 credits ____	
Reinstatement Committee Signature _____	<i>Processed by:</i> _____		<i>Date:</i> ____/____/____

White – Registrar's Office

Yellow copy – Student

RO-005/Revised: TL-10/2018