

APPLICATION FOR READMISSION UNDERGRADUATES ONLY

PLEASE NOTE: Applications with incomplete information and/or no signature will not be processed.

Please complete, sign and return application to

Office of the Registrar
University of West Georgia
Carrollton, Georgia 30118
or fax to (678) 839-6439 (*no fee required*)

ID OR SOCIAL SECURITY NUMBER
DATE _____

SEMESTER RETURNING TO UWG _____ PREV SEMESTERS AT UWG _____

LEGAL NAME _____

ADDRESS/PHONE/EMAIL:

PERMANENT _____
Street City/State/Zip Phone

MAILING _____
Street City/State/Zip Phone

YOUR *myuwg* EMAIL (You will be contacted at this address) _____

GENDER: Male Female DATE OF BIRTH _____

RACE/ETHNIC BACKGROUND (Optional)

Are you Hispanic or Latino? Yes No

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or other Pacific Islander White

APPLYING AS:

Working on 2nd degree Transient Unclassified (holds Baccalaureate degree)

Transfer Auditor Returning Undergraduate

DEGREE SOUGHT _____ MAJOR _____ CONCENTRATION _____

RELIGIOUS PREFERENCE (Optional) _____

Are you a legal, permanent resident of Georgia? Yes No

If yes, how long have you lived continuously in Georgia immediately prior to this application? _____

If yes, of what county? _____ If no, of which state are you a resident? _____

CITIZENSHIP: What is your country of citizenship _____

CAMPUS LOCATION: Where do you plan to take courses? on campus off campus

If off campus, which location Newnan Dalton Rome

(cont'd on next page)

EDUCATION:

High school from which you graduated (include GED, if applicable):

Name	City/State	Date of Graduation/GED
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List all colleges you have attended (Include all institutions where you registered for classes, even if a withdrawal was granted, and those you will attend prior to enrollment at UWG.) Joint enrollment work should be included here. By University System policy, students may not choose to exclude work attempted at another institution. Failure to list prior course work can result in the rejection or dismissal of the applicant.

Name of School	City/State	Did you graduate?	Date of Graduation	Dates (From/To)
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When you last attended West Georgia, were you on academic suspension for one year or academically dismissed?
 No Yes

If yes, you must submit a written letter outlining your reasons for requesting readmissions with this application.

Are you presently attending a college/university? No If yes, date of entrance _____

If yes, what will be your last date of attendance before reentering UWG? _____

Have you ever been expelled or suspended from school for disciplinary reasons? No Yes

If yes, attach a detailed explanation.

Have you ever been convicted and/or have charges pending of any criminal offense other than a minor traffic violation?

No Yes If yes, attach a detailed explanation.

I certify that the above statements are true and complete and understand that any omission or misrepresentation will invalidate any further consideration or subsequent readmission. If accepted, I agree to abide by the regulations of the University of West Georgia.

Signature of Applicant	Date
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