



GRADUATE RE-ENROLLMENT FORM

PROGRAM SOUGHT:

New Program

Prior program (no change in degree or major)

Degree _____ Major _____

Specialization (if applicable) _____

RE-ENROLLMENT REQUEST FOR:

Fall Spring Summer (available for selected programs) Year _____

Full-time Part-time

ORIGINAL DATE OF ADMISSION FOR GRADUATE STUDY:

Fall Spring Summer Year _____

DATE OF LAST ATTENDANCE:

Fall Spring Summer Year _____

NAME: _____

(Last)

(First)

(Middle)

FORMER NAME/OTHER NAMES: _____

CCSU ID#: _____ **SS#:(optional)** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

COUNTRY: _____ **EMAIL:** _____

PHONE:(home) _____ **(cell)** _____ **(work)** _____

Are you a citizen of the United States? Yes No If no, what is your country of Citizenship? _____

Are you a legal resident of Connecticut? Yes No If yes, indicate years in Connecticut _____

If non-citizen check appropriate box: F1 or F2 student visa Eligible non-citizen other visa

If permanent resident, list alien registration number: _____

Are you a U.S. Veteran? Yes No

Since your last date of attendance at CCSU, did you live and work in CT? Yes No

If not, please indicate the location(s) and years of duration (from-to) of your residency and employment.

If you have taken courses elsewhere, please list institutions in the section below. An official transcript must be sent to the Graduate Recruitment and Admissions Office from each college attended. Please notify your academic advisor if you have taken courses that may be considered for transfer.

Institution Name Location (City/State) Dates Attended Degree Awarded

Student Signature _____ Date _____

\$50 Check Enclosed

INSTRUCTIONS:

The RE-ENROLLMENT FORM is for:

- Previously enrolled(continuing) graduate students wishing to re-enroll after 2 years (or more) of being in an inactive or withdrawn status.
- Active continuing graduate students who have been withdrawn for failure to pay the continuing registration fee.

PLEASE COMPLETE THIS FORM AND SUBMIT A \$50 RE-ENROLLMENT FEE TO THE ADDRESS LISTED BELOW. MAKE CHECK PAYABLE TO CCSU.

RETURN TO:

*Graduate Recruitment and Admissions Office
Central CT State University
Henry Barnard Hall RM 102
1615 Stanley Street
New Britain, CT 06051-4010*

If you completed your previous Graduate program and wish to begin new program, complete a new Graduate Application for Admission.

FOR OFFICE USE ONLY:

Information Requested: _____

CPA _____

Degree _____

Program _____

Specialization _____

Action/Date _____