

## **Application for Re-Admission**

## Vancouver Campus

This application is to be used by students who have attended Fairleigh Dickinson University – Vancouver previously and officially withdrew from the university. This form is also for those students who have been absent without official leave for more than one year. Please complete this form and upload it to the Admissions portal.

Last Name:	First Name:	Student ID:	
Program:		Concentration:	
E-mail:			
ADDRESS			
Apt #: Street Address:			
Province/State:	Country:	Postal Code:	
Part A- Readmission.			
ntended term for Readmission: $\square$ Win	nter 🗆 Summer 🗀 Fall Year: 20	Status:  Full time  Part time	
Are you a: Graduate student	☐Undergraduate student	Matriculated: ☐ Yes ☐ No	
rogram:	Concer	ntration:	
Part B- Please indicate previous studi	· ·	•	
Dates attended: From:			
eason for leaving:			
Part C- Other institutions attended si Name of College/University	Dates Attended (From - To		
Official Transcripts must be provided	Attached with application:	☐ Yes ☐ No Comments:	
Official Transcripts must be provided are you applying for Transfer Credits:	☐ Yes ☐ No		
Official Transcripts must be provided are you applying for Transfer Credits:	☐ Yes ☐ No	☐ Yes ☐ No Comments:	
**Official Transcripts must be provided  Are you applying for Transfer Credits:	☐ Yes ☐ No ature of Applicant	 Date	
*Official Transcripts must be provided Are you applying for Transfer Credits:  Sign	☐ Yes ☐ No  ature of Applicant  TO BE COMPLETED BY RECOR	Date  DS OFFICE	
Completed Credits	TO BE COMPLETED BY RECOR	Date  DS OFFICE	-
Official Transcripts must be provided are you applying for Transfer Credits:  Sign	☐ Yes ☐ No  ature of Applicant  TO BE COMPLETED BY RECOR  Credits Left  Yes ☐ No Chec	Date    Date   D	-
Completed Credits	TO BE COMPLETED BY RECOR	Date    Date   D	-
Completed Credits	☐ Yes ☐ No  ature of Applicant  TO BE COMPLETED BY RECOR  Credits Left  Yes ☐ No Chec	Date    Date   D	-
Completed Credits  Completed Credits  Completed Credits  English Language Requirements met	☐ Yes ☐ No  ature of Applicant  TO BE COMPLETED BY RECOR  Credits Left  Yes ☐ No Chec  APPROVAL	Date    Date   D	-
Completed Credits  English Language Requirements met  Program Coordinator	TO BE COMPLETED BY RECOR  Credits Left  Yes No Chec  APPROVAL  Date	Date  DS OFFICE to Grad: CGPA: ked By: Date:  Admissions Date	- - -
Completed Credits  Completed Credits  Completed Credits  English Language Requirements met	☐ Yes ☐ No  ature of Applicant  TO BE COMPLETED BY RECOR  Credits Left  Yes ☐ No Chec  APPROVAL	Date    Date   D	- - -