



Have you ever been dismissed or suspended from a college for:

disciplinary reasons?  Yes  No

academic reasons?  Yes  No

Answering **yes** to either of the previous two questions will not automatically prevent re-enrollment. If you do respond **yes** to either of the previous two questions, you may be required to provide further information. Any deliberate falsification or omission of data may result in denial of your re-enrollment request.

**ACADEMIC INFORMATION**

Last semester and year of attendance at Binghamton:  Fall  Spring  Summer  Winter Year \_\_\_\_\_

Did you officially withdraw from Binghamton?  Yes  No

What was your status?  Matriculated (degree-seeking)  Non-degree

Were you previously enrolled in the Educational Opportunity Program (EOP)?  Yes  No

Check the school in which you were previously enrolled:

Harpur College of Arts and Sciences

School of Management

College of Community and Public Affairs  
(SEHD-Human Development)

Thomas J. Watson School of Engineering and Applied Science

Decker School of Nursing

What was your program/curriculum? \_\_\_\_\_

Please list all additional coursework that you have completed since leaving Binghamton.

College/University	Dates Attended	Program/Curriculum	GPA
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you earned a degree? Where \_\_\_\_\_ Date \_\_\_\_\_ Degree \_\_\_\_\_

Please send official transcript (s) to Binghamton University.

Include on a separate sheet any additional information that you would like us to consider.

*I am requesting re-enrollment to Binghamton University and realize that I am subject to the rules and regulations of the University. I certify that all the information submitted by me or on my behalf is true and correct. I understand that this request cannot be processed unless all questions are answered and all requested information is submitted. I understand also that any deliberate falsification or omission of data on or related to this application may result in denial of enrollment or dismissal from the University.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please be sure to sign and date this form. Did you check all applicable boxes and answer all questions?

Please retain a copy of this form and all attachments for your records.

Return required form to:

Office of Undergraduate Admissions

Binghamton University, PO Box 6001, Binghamton, New York 13902-6001

Phone: 607-777-2171, Fax: 607-777-4445, admissions.binghamton.edu



www.binghamton.edu

*Binghamton University is strongly committed to affirmative action. We offer access to services and recruit students and employees without regard to race, color, gender, religion, age, disability, marital status, sexual orientation or national origin.*