

GANNON

UNIVERSITY

Undergraduate Re-Admission Application (Please Print All Information)

First Name _____

Middle Name _____

Last Name _____

Suffix _____

Name used when last attended (if different from above) _____

<p>Home/Permanent Address (Number and Street)</p> <p>_____</p> <p>_____</p> <p>City, State/Province, Zip/Postal _____ Country _____</p>	<p>Social Security Number (U.S. Citizens Only) _____</p> <p>Birth Date _____ <input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Home Telephone Number (Including Area Code) _____</p>
<p>Mailing Address (if different than Home/Permanent address)</p> <p>_____</p> <p>_____</p> <p>City, State/Province, Zip/Postal _____ Country _____</p>	<p>Cell Phone Number (Including Area Code) _____</p> <p>E-mail Address _____</p> <p>Preferred Contact Method (Check One) <input type="checkbox"/> Home Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> E-mail</p>

Citizenship/Language (Check One)

U.S. Citizen Dual U.S. Citizen U.S. Permanent Resident: Visa Type _____ Alien Registration # _____

Other Citizenship: Visa Type _____ Country of Citizenship _____ Country of Birth _____

First/Native Language _____

Ethnicity/Race (Optional; this information is for statistical purposes only and has no bearing on admission to the University.)

Are you Hispanic/Latino? Yes No

Check the following race(s) that apply to you:

American Indian or Alaska Native Black or African American White
 Asian Native Hawaiian or Other Pacific Islander

Religious Affiliation (Optional; this information is for statistical purposes only and has no bearing on admission to the University.)

Roman Catholic Greek Catholic Greek Orthodox Jewish Baptist
 Episcopal Lutheran Methodist Presbyterian Other: _____

Additional Personal Information (Check if applicable.)

Veteran of the U.S. Armed Forces; branch: _____

Have you ever been convicted of a misdemeanor, felony or other crime? Yes No

Applying for: (Select one from each column.)

<input type="checkbox"/> Fall 20____Term	<input type="checkbox"/> Day	<input type="checkbox"/> Full-Time	<input type="checkbox"/> I plan to live in Gannon Housing
<input type="checkbox"/> Spring 20____Term	<input type="checkbox"/> Evening	<input type="checkbox"/> Part-Time	<input type="checkbox"/> I plan to live off-campus
<input type="checkbox"/> Summer 20____Term			

Educational History

Date you last attended Gannon University _____ (month/year)

Have you ever been academically dismissed from Gannon University? Yes No

Major pursued when last attended _____ Major you now plan to pursue _____

Colleges attended since withdrawal from Gannon University: _____

I have not been enrolled at Gannon University in five or more years and wish to be considered for academic forgiveness.

