

UNIVERSITY OF MINNESOTA MORRIS

APPLICATION FOR READMISSION

UMM students who have interrupted their enrollment for more than one semester must submit this application to be considered for re-admission. If it has been less than two semesters, contact the Office of the Registrar at (320) 589-6027. The University of Minnesota, Morris reserves the right to deny admission to an otherwise admissible applicant if it is determined that the applicant's enrollment would not be in the applicant's and/or the University's best interest.

You must complete all fields with an asterisk (*) in PART 1, for identification, admission, and academic records purposes. The remaining fields are used for positive identification, and institutional research. Data privacy information is available on the One Stop Student Services website.

Return this form to the Office of Admissions

By U.S. Postal Service mail:
Office of Admissions
600 East 4th Street
Morris, MN 56267

In person on campus:
Welcome Center

By Fax:
320-589-6051

Questions?
Phone: 320-589-6035
Toll Free: 888-UMM-EDUC
Email: admissions@morris.umn.edu

Please type or print legibly. **The form is not complete until you add your signature below.**

PART 1. Student Background

Student ID or SSN	*Name (last, first, mi)		*Birth date (mm/dd/yyyy)	
*Current Address		*City		*State *Zipcode
E-mail Address		Day Phone ()	Other Phone: Cell or Evening ()	
Term of Expected Return: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> May/summer Year 20			Last Term Attended: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> May/summer Year	
*Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation, or is any such charge pending against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'yes', attach a description of the incident(s), including date(s) and location(s). If your answer changes prior to enrollment, you must promptly contact the Office of Admissions to provide an explanation.			State in which you claim legal residency:	How long have you lived in that state?

PART 2. Readmission Information

A. Reason for Leaving UMM: (attach additional sheets if needed):

B. Activity During Absence from UMM: Please attach a separate statement addressing your activity since leaving UMM.

C. Reason for Returning:

<input type="checkbox"/> Complete B.A. Major(s): _____	<input type="checkbox"/> Licensure Only Fields: _____
<input type="checkbox"/> Add Major to B.A. Major(s): _____	<input type="checkbox"/> Online Classes Only
<input type="checkbox"/> Add Minor to B.A. Minor(s): _____	<input type="checkbox"/> Other Specify: _____

e.g. transfer courses to UMM to complete degree

PART 3. Post-Secondary Institutions

List all post-secondary institutions attended since attending the University of MN, Morris. Official transcripts from these institutions must be forwarded to the Office of Admissions. **A decision cannot be made until they are received.**

Name of Institution	From (mm/yy)	To (mm/yy)	*Eligible to Return (Y/N)
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

* If you answered "no" in this section, please provide an explanation of your ineligibility to return on a separate sheet.

PART 4. Certification

I certify that the information I have provided on this application and on all other application materials is complete, accurate, and true to the best of my knowledge. I understand that it is my responsibility to request that official transcripts from each academic institution that I have attended be submitted directly to the University of Minnesota, Morris. I understand that misrepresentation of application information is sufficient grounds for canceling my admission or registration.

Student's Signature	Date
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For Office Use

<input type="checkbox"/> Service Ind	<input type="checkbox"/> Program/Plan	<input type="checkbox"/> Term Activation	<input type="checkbox"/> Address	<input type="checkbox"/> Appt Time	<input type="checkbox"/> Reg Info Sent	<input type="checkbox"/> Email Grp
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