



Re-Admission Form (Revised September 2022)

Office of the Registrar/Student Records

300 N. Beaty Street, Athens, AL 35611

Fax: 256.233.8163, Phone: 256.233.8131

Email: registrar@athens.edu

This form is a fillable PDF. Please complete, sign/digitally sign, and submit to the Office of the Registrar via email, fax or in person. Complete this form if you are returning to Athens State University after an absence of two consecutive semesters (not including the Summer semester). Please Note: Students returning who have previously completed a degree or certificate program at Athens State and are returning to pursue a new degree/program OR were previously admitted and enrolled as a certificate or non-degree seeking and now wish to become degree-seeking must complete a New Student Application and meet admission requirements for the new degree goal/program.

Semester of Re-Admission: _____ Year: _____

Athens State University Student ID (if known): _____

Last 4 Digits of Social Security Number: _____ Date of Birth: _____

Current Last Name: _____

First Name: _____

Middle Name: _____

Former Name(s) When Previously Enrolled: _____

Current Address: _____
Street City State Zip Code

Have you lived in Alabama for the past 12 months:

Cell Number: _____ Personal Email Address: _____

Approximate Dates of Last Attendance at Athens State University: _____

Do you intend to register for online courses:

Do you intend to register for in-person classes:

Enrollment Status when previously enrolled:

Do you wish to pursue the same major and catalog year that you previously declared:

[If you chose 'no', please view the catalog to select your new major, etc.](#)

Major: _____

Minor: _____

Concentration: _____

List any colleges/universities attended since last attending Athens State University:

(official transcripts from each must be sent to admissions@athens.edu)

Were you on academic suspension/dismissal from any of these institutions?

Signature/Date (required):