

## South Dakota Board of Regents Undergraduate Student Readmission Form

(Please return to the Admissions Office of the University to which you seek readmission)

**Purpose:** This form is intended for use by students who have attended a South Dakota Regental University, discontinued enrollment, and now seek readmission. To insure proper evaluation of the readmission request, some students may be required to submit information beyond that requested on this form.

Legal Name (last, first, middle): \_\_\_\_\_

Former Name(s): \_\_\_\_\_ Preferred First Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Student ID Number (if unknown, you may provide Social Security Number): \_\_\_\_\_

**Current Mailing Address**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

**Permanent Mailing Address**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Residency/Selective Service Information**

Have you lived in South Dakota for the past 12 months?  Yes – county: \_\_\_\_\_  No – state of residence: \_\_\_\_\_

If you are a South Dakota resident, but you have not lived in South Dakota for the past 12 months, please explain: \_\_\_\_\_

Males born after December 31<sup>st</sup>, 1959 are required to register with Selective Service prior to admission at any state-supported university. Are you registered with Selective Service?  Yes  No, I am female  No, I am an exception to SD codified law

Please explain any exception: \_\_\_\_\_

<p><b>Select your home university (the university from which you will obtain your degree):</b>  <input type="checkbox"/> BHSU <input type="checkbox"/> DSU <input type="checkbox"/> NSU <input type="checkbox"/> SDSMT <input type="checkbox"/> SDSU <input type="checkbox"/> USD</p> <p><b>Indicate location(s) where you intend to take classes:</b>  <input type="checkbox"/> BHSU <input type="checkbox"/> DSU <input type="checkbox"/> NSU <input type="checkbox"/> SDSMT <input type="checkbox"/> SDSU <input type="checkbox"/> USD  <input type="checkbox"/> UC - Sioux Falls <input type="checkbox"/> UC - Rapid City <input type="checkbox"/> CUC <input type="checkbox"/> On-line</p> <p><b>Do you plan to live on campus in a residence hall?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Semester and year you wish to reenroll:</b> <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: _____</p> <p><b>Educational Goal:</b>                  Will you pursue a degree? <input type="checkbox"/> Yes <input type="checkbox"/> No                  If yes, what degree? _____                  If no, then you are not seeking a degree; please understand that you will not qualify to receive federal financial aid.</p>	<p style="text-align: center;"><b>Office Use Only</b></p> <p><b>Univ Last Att:</b> _____</p> <p><b>Program:</b> _____</p> <p><b>Last Cat:</b> _____</p> <p><b>Last Stud Type:</b> _____</p> <p><b>Res:</b> _____</p> <p><b>CGPA:</b> _____ <b>CTG:</b> _____</p> <p><b>Acad Stand:</b> _____</p> <p><b>Holds:</b> _____</p>
--	---

**Post Secondary Education**

In chronological order (use back of form if needed), list all post-secondary institutions you attended after discontinuing enrollment in the South Dakota public university system (regardless of length of attendance and even if no work was completed). Failure to list all attended institutions may result in loss of credit and/or dismissal.

Name of Institution	Location (City/State)	From Month/Year	To Month/Year	Diploma Earned

If you are transferring from another institution, are you eligible to return to that institution?  Yes  No  
 If no, please explain: \_\_\_\_\_

To the best of my knowledge, all answers I have provided on this form are complete and accurate. I understand that a readmission decision will be based on this information as well as other relevant academic and administrative information.

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

<p><b>Readmission Fee:</b> Have you attended a South Dakota public university as a degree-seeking student during any of the three semesters (including summer) immediately prior to the term for which you are applying? Or did you stop attending a South Dakota public university because you were deployed by the military?</p> <p><input type="checkbox"/> Yes - your fee will be waived.  <input type="checkbox"/> No - please submit a \$20 application</p>
---