



**REQUEST FOR READMISSION**

Before you present this form to the Admissions Office, please pay a readmission fee of ..... L. L. at the Cashier's Office. ( Not refundable ).

FAMILY NAME ..... PERSONAL NAME .....

Dates of attendance at H. U. from ..... to .....

Semester and year for which readmission is requested.

Semester..... Year .....

Major field of study at the time of leaving .....

Major intended upon readmission .....

Reason for leaving the University .....

ACTIVITIES SINCE HAVING LEFT THE UNIVERSITY

Did you attend any university during this time ? .....Yes .....No

If yes, You must request your university to send us an official transcript of your record. This request for readmission can be considered only after this has been received.

Were you employed in any job during this time ?.....Yes .....No

If yes, please present a statement from your employer certifying your position, and kind of work.

If no, indicate below how you spent your time.

Home address : .....

Mailing address : P. O. Box .....Tel : .....

FOR OFFICE USE

DATE RECEIVED ..... RECEIVED BY .....

