



HAIGAZIAN UNIVERSITY

REQUEST FOR REACTIVATION OF ACCEPTED APPLICATION FOR ADMISSION

I.D.	
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First Name:	Family Name:
Date you expect to join HU:	
Semester:	Year:
Major initially accepted:	
New Major intended to follow:	
1 st Choice	2 nd Choice
Reason for not joining Haigazian University:	

Activities since Last Application:	
1) Did you attend any University? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, you are required to present an official transcript of your records.	
2) Were you employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please present a statement from your employer certifying your position and kind of work.	
If no, indicate how you spent your time:	

Permanent Address:	
Building	Street
P.O. Box	City
Country	E-mail
Tel. (Home):	(Mobile):

FOR OFFICE USE	
Received by	Date
Processed by	Date