Who should use this form?
This form is for use by students who have attended Ohio University since 1985 but who are not currently enrolled and would like to return to Ohio University.

Who should not use this form?
If you were previously enrolled as a special student at Ohio University and wish to return as a degree-seeking student, you should contact University College, Chubb Hall 140, Athens, Ohio 45701, 740.593.1935, university.college@ohio.edu, to obtain the correct form.

If you were previously enrolled as an undergraduate student at Ohio University and wish to return as a graduate student, you should contact the Graduate College, Research and Technology Center 220, Athens, Ohio 45701, 740.593.2800, graduate@ohio.edu, to obtain the correct form.

If you were dropped from Ohio University for academic reasons and now wish to return, you must petition for reinstatement through the dean of the college from which you were dropped. Once you have been reinstated, you must return this form to the Office of the University Registrar.

NOTES ON COMPLETING THIS FORM
Please use the full, legal name you used during your previous enrollment. If your name has changed, please attach the appropriate legal document to request a name change (passport, court action document, divorce decree, marriage certificate).

If you have enrolled at another college or university, since you were at OHIO, it must be reported. Failure to do so is grounds for terminating enrollment. You must have an official transcript from each institution attended sent to Office of Undergraduate Admissions, Chubb Hall, Ohio University, Athens, Ohio 45701.

Questions about registering for classes should be directed to the Office of the University Registrar, the college student services office to which you are re-enrolling, or the appropriate regional campus student services office.

UNDERGRADUATE STUDENTS
This form should be completed, signed, and returned based on the campus you wish to attend:

<table>
<thead>
<tr>
<th>Athens Campus/Campus</th>
<th>Chillicothe Campus</th>
<th>Eastern Campus</th>
<th>Lancaster Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of the University Registrar</td>
<td>Student Services Bennett Hall</td>
<td>Student Services Shannon Hall</td>
<td>Student Services</td>
</tr>
<tr>
<td>Chubb Hall</td>
<td>Ohio University Bennett Hall</td>
<td>Ohio University St. Clairsville, OH 45950</td>
<td>Brasee Hall</td>
</tr>
<tr>
<td>Ohio University</td>
<td>Chillicothe, OH 45601</td>
<td>Phone: 740.699.2536</td>
<td>Ohio University</td>
</tr>
<tr>
<td>Athens, OH 45701</td>
<td>Phone: 740.774.7240</td>
<td>Fax: 740.695.7082</td>
<td>Phone: 740.654.6711</td>
</tr>
<tr>
<td>Phone: 740.593.4186</td>
<td>Fax: 740.774-7295</td>
<td>Email: <a href="mailto:eastern@ohio.edu">eastern@ohio.edu</a></td>
<td>Fax: 740.653.5130</td>
</tr>
<tr>
<td>Fax: 740.593.0216</td>
<td>Email: <a href="mailto:chillicothe@ohio.edu">chillicothe@ohio.edu</a></td>
<td></td>
<td>Email: <a href="mailto:lancaster@ohio.edu">lancaster@ohio.edu</a></td>
</tr>
<tr>
<td>Email: <a href="mailto:registrar@ohio.edu">registrar@ohio.edu</a></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Southern Campus

| Student Services | 1804 Liberty Avenue | Ohio University | Ironton, OH 45638 | Phone: 740.533.4600 | Fax: 740.533.4590 | Email: southern.admissions@ohio.edu |

GRADUATE STUDENTS
This form should be completed, signed, and returned to:

| Graduate College | Research and Technology Center 220 | Ohio University | Athens, OH 45701 | Phone: 740.593.2800 | Fax: 740.593.4625 | Email: graduate@ohio.edu |

Ohio University is an affirmative action institution.

9/6/2013
I wish to enroll in (check one)    Undergraduate classes    Graduate classes (course numbered 5000 or above)

Which campus do you plan to attend?    Athens    Chillicothe    Eastern    Lancaster
    Southern    Zanesville    eCampus

Name: ________________________________

Student PID: ____________________________ Previous Name (if changed since last enrollment): ____________________________

Current Address: ________________________

Number/Street__________________________

City __________________ State ________ Zip Code ________ Phone: (______) ______________________

Are you planning to live on campus in a residence hall? Yes    No

Address while attending Ohio University if different from current address:

Number/Street__________________________

City __________________ State ________ Zip Code ________ Phone: (______) ______________________

Cell Phone: (______) ____________________ Private (University business use only)

Public (i.e., published as your local phone number in the Ohio University online directory)

Have you attended another institution since your last enrollment at Ohio University? Yes    No

Complete the following:

Name of Institution __________________ Location ________ Dates of Attendance __________________ Were you Dismissed?

No    Yes, When ______________

No    Yes, When ______________

Degree(s) Earned: __________________________

Emergency Contact Information

Name: __________________________ Relationship: __________________________

Address: __________________________

Number/Street__________________________

City __________________ State ________ Zip Code ________ Phone: (______) ______________________

Please indicate if you have ever been convicted of, are currently charged for, or are under indictment for a felony: Yes    No

Statement of Integrity: I certify that the information contained within this form is complete and accurate, and I understand that submission of inaccurate information is sufficient cause for terminating my enrollment.

Signature (required) __________________________ Date __________________________

Student: Do not write below this line.

Holds ________    Standing ________    Program Plan ________

Academic Drop ________    Hours Earned ________    Term Activation ________

Last Date of Attendance ________    Previous Degree Program ________    DARS ________

Over Time Limit ________    Enrollment Appointment ________    Sent to Legal Affairs ________