



# OHIO UNIVERSITY

## RE-ENROLLMENT FORM

Students who have attended since 1985.

Office of the University Registrar  
Chubb Hall  
Athens OH 45701-2979  
Fax: 740.593.0216

I wish to re-enroll for (check one)  Fall  Spring  Summer \_\_\_\_\_  
Academic Year

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

Campus: \_\_\_\_\_ Student ID (PID from ID card): \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Previous Name (if changed since last enrollment): \_\_\_\_\_

Current Address: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

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

Address while attending Ohio University if different from current address: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_  Private (University business use only)  Public (i.e., published as your 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?	
_____	_____	_____	<input type="checkbox"/> No	<input type="checkbox"/> Yes, When _____
_____	_____	_____	<input type="checkbox"/> No	<input type="checkbox"/> Yes, When _____

Degree(s) Earned \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: (\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_

Please indicate if you have ever been convicted of a felony, are currently charged, or 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 Stack _____
Academic Drop _____	Hours Earned _____	Term Activation _____
Last Date of Attendance _____	Previous Degree Program _____	Sent to Legal Affairs _____
Over Time Limit _____	Enrollment Appointment _____	



**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:

**Athens Campus/ eCampus**

Office of the University Registrar  
Chubb Hall  
1 Ohio University  
Athens, OH 45701  
Phone: 740.593.4495  
Fax: 740.593.0216  
Email: registration@ohio.edu

**Chillicothe Campus**

Student Services  
Bennett Hall  
Ohio University  
Chillicothe, OH 45601  
Phone: 740.774.7240  
Fax: 740.774.7295  
Email: chillicothe@ohio.edu

**Eastern Campus**

Student Services  
Shannon Hall  
Ohio University  
St. Clairsville, OH 45950  
Phone: 740.699.2536  
Fax: 740.695.7079  
Email: eastern@ohio.edu

**Lancaster Campus**

Student Services  
Brasee Hall  
Ohio University  
Lancaster, OH 43130  
Phone: 740.654.6711  
Fax: 740.681.2606  
Email: lancaster@ohio.edu

**Southern Campus**

Student Services  
1804 Liberty Avenue  
Ohio University  
Ironton, OH 45638  
Phone: 740.533.4600  
Fax: 740.533.4632  
Email: southern.admissions@ohio.edu

**Zanesville Campus**

Student Services  
1425 Newark Road  
Ohio University  
Zanesville, OH 43701  
Phone: 740.588.1439  
Fax: 740.588.1444  
Email: ouzservices@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.**