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/eCampus</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 Ohio University</td>
<td>Student Services Shannon Hall Ohio University</td>
<td>Student Services Brasee Hall Ohio University</td>
</tr>
<tr>
<td>Chubb Hall Ohio University</td>
<td>Chillicothe, OH 45601</td>
<td>St. Clairsville, OH 45950</td>
<td>Lancaster, OH 43130</td>
</tr>
<tr>
<td>Athens, OH 45701 Phone: 740.593.4495 Fax: 740.593.0216 Email: <a href="mailto:registrar@ohio.edu">registrar@ohio.edu</a></td>
<td>Phone: 740.774.7240 Fax: 740.774-7295 Email: <a href="mailto:chillicothe@ohio.edu">chillicothe@ohio.edu</a></td>
<td>Phone: 740.699.2536 Fax: 740.695.7082 Email: <a href="mailto:eastern@ohio.edu">eastern@ohio.edu</a></td>
<td></td>
</tr>
</tbody>
</table>

Southern Campus
Student Services 1804 Liberty Avenue Ohio University Ironton, OH 45638 Phone: 740.533.4600 Fax: 740.533.4632 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. 1/7/2015
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: ____________________

Name: ____________________________________________

Student ID (PID from ID card): __________________________

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 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:

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Location</th>
<th>Dates of Attendance</th>
<th>Were you Dismissed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________________</td>
<td>_________</td>
<td>___________________</td>
<td>☐ No ☐ Yes, When______</td>
</tr>
<tr>
<td>___________________</td>
<td>_________</td>
<td>___________________</td>
<td>☐ No ☐ Yes, When______</td>
</tr>
<tr>
<td>___________________</td>
<td>_________</td>
<td>___________________</td>
<td>☐ No ☐ Yes, When______</td>
</tr>
</tbody>
</table>

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.**

<table>
<thead>
<tr>
<th>Hold (HLD2)</th>
<th>Degree-seeking &lt;45 hours</th>
<th>Sent to Legal Affairs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Drop (SAST)</td>
<td>Transfer degree-seeking &lt;90 hours</td>
<td></td>
</tr>
<tr>
<td>Last Date of Attendance</td>
<td>Previous Degree Program</td>
<td></td>
</tr>
<tr>
<td>Over Time Limit</td>
<td>Enrollment Appointment</td>
<td></td>
</tr>
</tbody>
</table>

10/24/2012