

Name:		For Office Use Only DePaul Number:	
Address:			
City:		State:	Zip Code:
Daytime Phone:		Home Phone:	
E-mail:		Social Security # (optional)	
<input type="checkbox"/> Readmission Term _____ Year _____ NOT IN ATTENDANCE FOR AT LEAST ONE ACADEMIC YEAR			
Current Program:			
<input type="checkbox"/> Program Reclassification: Term _____ Year _____ (4) NEVER BEFORE ADMITTED TO THE PROGRAM FOR WHICH CURRENTLY APPLYING			
<input type="checkbox"/> M. S. - Applied Mathematics	<input type="checkbox"/> M. S. – Physics		
<input type="checkbox"/> M. S. - Applied Statistics	<input type="checkbox"/> M.P.H. - Public Health		
<input type="checkbox"/> M. A. - <input type="checkbox"/> M. S. - Biological Sciences	<input type="checkbox"/> M. S. - Public Service Management <input type="checkbox"/> M.P.A. – Public Administration		
<input type="checkbox"/> M. S. - Chemistry	<input type="checkbox"/> M. S. - Health Law and Policy		
<input type="checkbox"/> M. A. - English	<input type="checkbox"/> M. S. - International Public Service		
<input type="checkbox"/> M. A. - History	<input type="checkbox"/> M. S. - Science Education		
<input type="checkbox"/> M. A. - <input type="checkbox"/> M. S. - Interdisciplinary Studies	<input type="checkbox"/> M. S.W. - Social Work		
<input type="checkbox"/> M. A. - International Studies	<input type="checkbox"/> M. A. - Sociology		
<input type="checkbox"/> M. A. - Liberal Studies	<input type="checkbox"/> M. A. - Women’s and Gender Studies		
<input type="checkbox"/> M. A. - Mathematics Education	<input type="checkbox"/> M. A. – Writing and Publishing		
<input type="checkbox"/> M. A. - New Media Studies	<input type="checkbox"/> M.A. – Writing, Rhetoric and Discourse		
<input type="checkbox"/> M. S. - Nursing	<input type="checkbox"/> Non-degree		
	<input type="checkbox"/> Certificate <i>Please specify:</i> _____		
Student Signature:		Date:	
For Office Use Only			
<input type="checkbox"/> Readmit		<input type="checkbox"/> Program Change Approved	<input type="checkbox"/> Denied
<input type="checkbox"/> Readmit with Conditions		<input type="checkbox"/> Program Change with Conditions	
Conditions/Comments:			
Chairperson/Director Signature:		Date:	
Dean’s Signature:		Date:	