THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

RE-ADMISSION REQUEST FORM

Health Sciences Dean's Office

Students previously enrolled in Health Sciences Programs who wish to resume their studies may be eligible to submit a Re-admission Request Form instead of re-applying. If seeking a different degree or field of study, students must apply to the new program. An abbreviated re-admission application process is not available for the following disciplines: Clinical Microbiology, Medical Laboratory Sciences, Molecular Diagnostic Science, Laboratory Medicine, Leadership in Clinical Practice and Education, Physician Assistant, Physical Therapy, Pre-Medicine, and Translational Health Sciences.

In order to be eligible to use the Re-admission Request Form, a student must have: (1) left the University in good standing; (2) prior coursework that meets the minimum scholarship requirements; (3) departed within the prior 3 calendar years; and (4) successfully completed the terms of their conditional admission, if applicable. Requests for re-admission are considered on the basis of regulations and curricula currently in effect. Re-admission is not guaranteed. If re-admitted, student understands they must meet degree requirements in effect the semester of re-admission for the specified program of study. For more information, please contact Health Sciences Student Services: <a href="https://doi.org/10.1007/journal.o

Student Name:	GWID:			
Date of Birth (MM/DD/YY):	GW Email:			
Mailing Address:	City/State/Zip Code:			
	Country, if not US:			
Prior GW				
Degree/Certificate:	Prior GW Major:			
Last semester/year of enrollment (e.g., Fall 2017):				
For which semester are you seeking readmission (e.g., Spring 2019):				
Recent Education History : If you attended another institution since you left GW, Please indicate the name and dates of enrollment*:				

*Please note you must submit official transcripts for any institution you attended between enrollment periods. The program

office will contact you for the required documentation.

Have you ever been subject to academic or disciplinary action	n from any institution?	Yes	No	
If yes, please provide a statement detailing dates and circums	stances:			
What was your cumulative GW GPA prior to your departure?				
Personal Statement				
Why would you like to return to GW at this point ir	your academic and professi	onal caree	er?	
Statement of Acknowledgement: By signing below, I certify that all information contained in my application is factually correct and honestly presented. I understand that the submission of false information or documents, knowingly making false statements, or concealing material information on my application will be grounds for denial of admission, withdrawal of an admission offer, or termination of enrollment.				
Student Signature: D	ate:			

For Office Use Only					
	Approve	Deny			
Comments:					
Program Director Signature:			Date:		
	Approve	Deny			
Comments:					
Department Chair Signature:			Date:		
	Approve	Deny			
Comments:					
HS Dean's Office Signature:			Date:		