## Holy Family University Application for Readmission

Complete and submit this form to request readmission to an undergraduate degree program at Holy Family University. Please be advised that certain programs may require additional application materials. You will be contacted if any additional materials are needed. All paperwork must be submitted to the Registrar's Office no later than two weeks prior to the term for which you are requesting readmission. Requests for readmission are subject to review and approval. Please be advised that academic program requirements may have changed, which may affect both the number of credits and length of time required for degree completion.

## **STUDENT: Please complete this section**

NAME:	Home Phone:
Address:	Cell Phone:
	HF ID # or S.S. #:
Requested Term for Readmission:	□ Spring □ Summer
Intended Major:	
I will be taking classes in the Division of Ex	tended Learning:   Yes   No
Intended Course Load:   □ Full Time	□ Part Time
Were courses completed at another institution Yes No (Note: If you have completed courses at another to the Registrar's Office)	n since you last attended Holy Family? ther institution, please have an official transcript se
other institutions must have an official trans	☐ Yes ☐ No ancial Aid and have completed additional courses cript sent to the Registrar's Office for evaluation. In the school where the student completed the
Applicant Signature:	Date: