



APPLICATION FOR READMISSION

Office of Enrollment Services
500 West County Line Road
Tougaloo, Mississippi 39174
Local: 601-977-7768
Toll Free: 1-888-42GALOO
www.tougaloo.edu

DIRECTIONS: Please complete this application and submit it to the Office of Enrollment Services with a non-refundable \$25 application fee.

Entering Term:

Spring 20 ___ Fall 20 ___ Summer 20 ___ Intended Major _____

Personal Data

_____ Male Female
Last Name First Middle Suffix
Tougaloo ID# _____

Maiden / Any other name on record _____

_____ Social Security Number E-Mail Address Date of Birth (Month/Day/Year)

_____ Permanent Mailing Address City State Zip County
Phone _____ Cell Phone _____

Last Semester of Attendance at Tougaloo Year _____ Semester _____

Date of Withdrawal _____ Reason _____

Have you attempted any additional college credit since you last attended Tougaloo? Yes No (Failure to list all colleges attended will void this readmission application. A transcript will be needed for each college attended.)

College/University	City/State	Dates Attended	
		From	To

Tougaloo College is committed to maintaining an educational environment characterized by safety, respect, and integrity.

Have you ever been expelled from, suspended from, or placed on probation at any high school or college for disciplinary reasons, academic dishonesty, or because of an offense that harmed or had the potential to harm others or yourself, or are you ineligible to return to any high school or college you have attended? Yes No If your answer is "yes" to the question, please provide an explanation statement.

The submission of fraudulent records or omission of former college history constitutes grounds for denial of admission or dismissal from the College. I hereby certify that all the information provided by me on this application is true to the best of my knowledge. This application will be considered after the information below is completed.

Signature of Applicant _____ Date _____

(THIS SECTION TO BE COMPLETED ONLY BY TOUGALOO PERSONNEL)

The student listed above has requested readmission to Tougaloo College. Please complete the necessary information and return this form to the Office of Enrollment Services.

Registrar: Is the student eligible to return? Yes No Initial _____ Date _____
If not, please state reason(s) below and/or condition(s) under which student may return:
Cumulative GPA: _____ No. of Semesters _____ No. of Credit Hours _____

Bursar: Is the student's account paid? Yes No Initial _____ Date _____
If not, state the amount owed and financial arrangements under which the student may return.
Balance owed: \$ _____

Financial Aid: Is the student eligible for financial aid? Yes No Initial _____ Date _____
Please state the condition(s) under which the student may return. _____

Student Affairs: Is there any reason, other than academic or financial, why this student may not return? Initial _____ Date _____
 Yes No If so, please state reason(s) and condition(s) under which the student may return.