

REACTIVATION APPLICATION

This form should only be submitted when students have been inactive (not attending class) for *less* than one year or 3 semesters*. Email completed scanned forms to undergrad-advisor@regent.edu or Fax to 757-352-4685.

COLLEGE OF ARTS AND SCIENCES	scanned forms to <u>undergrad-advisor@regent.ed</u>

Student ID:		Date:	
Legal Name (print):		Date of Birth:	
Former Name:	U.S. Citi	zen ☐ International ☐ Status Type:	
Current Address:			
Current Email Address:		Phone:	
Have you graduated from an	y Regent University program? Yes	No	
Expected graduation term if	enrollment status is reactivated?		
Term last enrolled:	Term you de	esire to re-enroll:	
Previous Degree Program (A	a.A. / B.A. / B.S.): Pre	evious Major:	
Previous Minor:	Previous Emphasis/Cognate:		
If so, please list school (s):	•	olled at Regent University? Yes □ No □	
		Date	
using the Readmission form fou who have not been enrolled for r Regent students, former student	nd at this link: https://www.regent.edu/ac nore than one year must meet the degree	year (3 semesters) should apply for readmission ad/undergrad/admissions/reactivation.cfm, Students requirements current at the time of readmission. different degree program than that of their last term	
School Use Only: Request Approved Denied	☐ Assigned Advisor:		
		alog Term:	
□ Re-evaluation of Credits req			
Authorized School Official Nam	e/Title (print):		
Signature of Authorized School Official:			
Registrar's Use Only:		GPA:	
		Registrar Staff/Date:	
Original # transfer credits:	Revised # transfer credits:	Registrar Staff/Date:	