



RE-ADMIT APPLICATION

Including Presidential/College Bound Scholars and Transient Students

Biographical Information

Legal name: _____ Preferred name: _____
Last First Middle Jr., etc.

Student ID. Number: _____ Gender: Male Female

Birth date: _____ Place of Birth: _____

Address: _____ Phone Number: _____

_____ Other Phone: _____

_____ City County State Zip code

If different from above, please give your mailing address for all of your correspondence: _____

Are you a military veteran? Yes No

Application Information

Are you applying for: full-time status? part-time status?

What is your desired entrance date? Fall semester, _____ Spring semester, _____ Summer semester, _____
year year year

When were you last enrolled? _____
date

Non-credit What do you hope to achieve through re-enrolling at Lyon? _____

Why did you originally leave?: _____

Biographical Information

Have you attended another college or university? Yes No If yes, please complete the following:

Name of Institution: _____ Dates Attended _____ Degree of Credits Earned _____

Employment Information

Occupation: _____ Employer: _____ Phone: _____

Optional Information

What is your marital status? Single Married Separated Divorced

If married, please provide the name and occupation of our spouse: Name: _____ Occupation: _____

Please provide additional comments regarding your goals, motivation, background, and experience that you feel will be helpful for your re-admission.

* I understand that I may not be eligible for financial aid as a special student.
* I understand that I am subject to all rules and regulations of the college, including the Honor Code.

_____ signature _____ date