



REQUEST TO REENROLL IN GRADUATE STUDIES

(To be used by previously enrolled MU graduate students)
University of Missouri-Columbia

Instructions — Read Carefully

1. **If you have been enrolled at MU within the last year as a degree-seeking graduate student and are returning to the same program, or if you are a post-baccalaureate graduate student**, Graduate Admissions, 210 Jesse Hall will issue you a registration form & you do not need to submit this form.

If you are a returning graduate student applying to a different degree program, please contact your program of interest to ensure you have completed all degree program admission requirements.
2. **If it has been more than a year since your last enrollment**, complete this form and send it to the department to which you are requesting re-enrollment, along with transcripts for all college work done since last attending MU, and general test scores of the GRE or other exam required by the department, if not previously submitted.
3. **If you are a post-baccalaureate graduate student returning for additional studies**, send this form to Graduate Admissions, 210 Jesse Hall, Columbia, Mo. 65211
4. **If you are a former undergraduate student applying for admission to a department or as a post-baccalaureate graduate student**, complete a graduate application form and submit the \$45 domestic/\$60 international student application fee. **DO NOT USE THIS FORM.**

NOTE: No transcripts can be accepted directly from the student. Official transcripts must be sent to the department directly from the former institution. **FAILING TO COMPLETE THIS FORM FULLY OR GIVING MISINFORMATION CONCERNING PREVIOUS ENROLLMENT IN OTHER COLLEGES OR UNIVERSITIES WILL VOID YOUR RE-ENROLLMENT.** All transcripts become the property of the University.

NOTE: Re-enrolling as a post-baccalaureate graduate student does not guarantee future acceptance to a degree program.

Questions about **FINANCIAL AID** should be directed to the Office of Student Financial Aid, 11 Jesse Hall, Columbia, MO 65211, (573) 882-7506 or in Missouri 1-800-225-6075.

Questions about **HOUSING** should be directed to Residential Life, 125 Jesse Hall, Columbia, MO 65211, (573) 882-7275.

OUT-OF-STATE APPLICANTS: It is your responsibility to apply and register under the proper residence and to pay the correct tuition/fees. A pamphlet giving information on tuition and residence rules may be obtained from the Residency Office, 230 Jesse Hall, Columbia, MO 65211.

Some information requested is required by Title VI of the Civil Rights Act of 1964, Title IX of the Higher Education Amendments of 1972 and section 504 of the Rehabilitation Act of 1973 and is for the purpose of reporting to Federal Compliance Agencies concerning the equal education opportunity, in order to keep the records required by the Federal Government, and to assure that there will not be discrimination on the basis of race, color, religion, handicap, national origin or sex.

Graduate School
University of Missouri-Columbia
210 Jesse Hall
Columbia, MO 65211
573-882-6311
Fax: 573-884-5454
gradschl@missouri.edu
<http://www.gradschool.missouri.edu>



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Revised 07/2007

DEGREE-SEEKING APPLICANTS

Submit this application to the Director of Graduate Studies of the program to which you are applying, along with any other required application materials.

POST-BACCALAUREATE APPLICANTS

Applicants for Post-Baccalaureate graduate study should submit this form and outside transcripts directly to the Graduate School in Jesse Hall 210.

1. Name: _____ Student number: _____
(Last) (First) (Middle) (Maiden or former name)
2. Date of Birth: _____ 3. Social Security Number _____
(Month/Day/Year) (Optional, but required if applying for federal financial aid)
4. Local mailing address: _____ Telephone: _____
(Street, City, State, Zip)
5. Permanent mailing address: _____ Telephone: _____
(If different) (Street, City, State, Zip)
6. Email Address: _____
7. Are you a citizen of the US?
 Yes No--If no: What country? _____
 Are you a Permanent Resident? Yes (attach a copy of PR card) NO (attach a copy of current visa)
8. Are you a Missouri resident Yes No Residency information is available from Residency Office, 230 Jesse Hall

Questions 9 and 10 are optional and used for purposes of reporting to Federal Compliance Agencies. This information will not be used in determining admission.

9. Gender Male Female
10. Ethnic Origin (Non-citizen Permanent Residents of US should NOT designate "Non-Resident Alien".)
 American Indian/Alaskan Native Black Non-Hispanic White Non-Hispanic Asian or Pacific Islander
 Hispanic Non-Resident Alien (F or J Visa) Other

11. Name and location of ALL colleges attended since last enrollment at MU. Include dates of attendance & degrees earned. (if none, enter "none"). If currently enrolled, indicate in "Dates of Attendance" space. List schools beginning with most recent. Attach list if more space is necessary. Official transcripts for ALL colleges and universities attended must be sent to the department to which you are applying prior to their deadline. Transcripts that are marked "issued to student" are not considered official, unless in an institutionally sealed envelope. (Failure to indicate colleges or universities in which you have been enrolled will void your admission.)

Name of College	Location (City & State)	Dates of Attendance	Degrees Earned	Degree Dates
1				
2				
3				
4				

12. Term of desired re-enrollment (check one) Fall Spring Summer Year _____
13. Are you going to be taking classes online or through MU Direct? YES NO
14. Admissions category desired: Degree-Seeking Graduate Post-Baccalaureate Student (Do not complete question 15)
15. Academic PROGRAM to which you are applying: _____ EMPHASIS AREA: _____
 DEGREE (circle one): MA MS MFA MM MST MACC MBA ME MPA MHS
 MOT MPH LLM MSW MEd EdSp EdD PhD DPT Other _____

Legal Signature: I hereby affirm that the information provided by me in this application is true and correct, and that there are no omissions or misstatements in my application. I consent to the University of Missouri–Columbia taking one or more of the following upon discovery, at any time, of any such omission or misstatement of mine in this application (1) Voiding of my admission to the University; (2) Voiding of my registration with the University; (3) Voiding of credit(s) for course work completed at the University; and (4) Distribution of information relating to such omissions and/ or misstatements to other academic institutions, governmental agencies, and other third parties. I authorize the University of Missouri-Columbia to maintain all my records under this name.

Student Signature _____ **Date:** _____

TO BE COMPLETED BY ACADEMIC PROGRAM ONLY

- Accept student for reenrollment—Include specific program, emphasis area, and degree if student did not accurately list above.

 Advisor: First Name: _____ Last Name: _____
- Deny reenrollment request.
- Signature of Director of Graduate Studies** _____ **Date:** _____

Decision of Academic Program