

APPLICATION FOR READMISSION

CLEAR ALL FIELDS

CWID # _____

PLEASE PRINT OR TYPE

LAST NAME		FIRST NAME		M.I.	PHONE NO. <input type="checkbox"/> Cell <input type="checkbox"/> Home ()					
ADDRESS (Number and Street)					APT. NO. OR C/O					
CITY		STATE	ZIP CODE		COUNTRY (If other than U.S.A.)					
Personal email address					PREVIOUS / MAIDEN NAME (if applicable)					
DATE OF BIRTH	MARITAL STATUS Married Not married		TITLE Mr. Ms.	SEX M F	U.S. CITIZEN? Yes No		CALIF. RESIDENT? Yes No		APPLYING FOR FINANCIAL AID AT PEPPERDINE? Yes No	
MAJOR / PROGRAM RE-APPLYING FOR					Undergraduate		Graduate			
EXPECTED GRADUATION DATE		DATE LAST ATTENDED		DATE TO RE-ENROLL						
20 _____ Fall (Aug/Sept) Summer (May) Spring (Jan)		20 _____ Fall (Aug/Sept) Summer (May) Spring (Jan)		20 _____ Fall (Aug/Sept) Summer (May) Spring (Jan)						

If you answer "Yes" to any of the following questions, please attach an explanation.

Has any college dismissed you or asked you to withdraw?	Yes	No
Have you been judged guilty of criminal or civil offenses other than minor traffic violations?	Yes	No

NON-U.S. CITIZENS PLEASE COMPLETE ►	TYPE OF VISA F-1 B-2 J-1 PRV (Green card) Other: _____	COUNTRY OF CITIZENSHIP _____
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PREFERRED CLASS LOCATION (for GSBM) ►	<input type="checkbox"/> Encino <input type="checkbox"/> Irvine <input type="checkbox"/> West Los Angeles <input type="checkbox"/> Westlake Village <input type="checkbox"/> Online
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Please list all colleges attended since leaving Pepperdine University. Official transcripts must be sent directly from all institutions listed to the Office of the University Registrar at Pepperdine University. Please indicate number of units currently in progress.

COLLEGE(s) ATTENDED (Use additional sheet if necessary)	LOCATION City / State	DATES (Mo/Yr)		MAJOR	DEGREE		NO. OF UNITS
		From	To		Received	Mo / Yr	

Employer: Position/Title:

Address:

City: State: Zip Code: Work Number:

I certify, that to the best of my knowledge, the information furnished in this application is true and complete. All official transcripts which I forward to the University become the property of the University and will not be forwarded to another institution nor returned to me. If there is a policy dispute between me and the University, the appropriate catalog will be used as the arbitrating medium.

Signature of Applicant: **X** _____ Date: _____

Pepperdine University is pleased to consider all applicants without regard to race, color, sex, religious affiliation, national origin, or non-disqualifying handicap.

PROGRAM OFFICE APPROVAL: _____ Date: _____