

Application for Readmission

- IF you are seeking readmission after (1-4) years of absence, please obtain the appropriate signatures and return completed form to the Registrar's Office in Laffin Hall, Room 225. or Regoffice@farmingdale.edu
- IF you are seeking readmission with five (5) or more years of absence you must file a SUNY application as a "TRANSFER" and list Farmingdale State College (95) as your prior college. For further information, please contact the **Admissions Office**.

Section I	 To be complete 	ed by student	
First Name:		Last Name:	RAM #
Telephone	e Number		
□ Readm	nission to same pro	evious degree/major:	
□ Readm	nission to different	t degree/major:	
Readmission is effective: Fall (YYYY)			Spring (YYYY)
	you have attende s) to the Admission		your absence, please send an official copy of your
Student's Signature			Date:
Section II	- To be complete	ed by Curriculum Chairpe	erson
*If studen	t was suspended f	rom the college, you are rec	quired to complete this section (Please check one):
	•	emic standing from suspensi	,
	ım Chairperson'		Good Standing (must have a 2.0 overall GPA)
			Date:
	(Print name)		(Signature)
Section II	<u>I</u>		
I.	IF you are an EO form to the Regist		ignature from the EOP office . Once signature is obtained, return
			Date:
	(Print name)		(Signature)
II.		or J-1 student, you must obta ed, return form to the <u>Registr</u>	in signature from the International Education office. Once ar's Office.
			Date:

(Signature)

Registrar's Office March 2020

(Print name)