



Application for Re-Admission

Students who wish to return to the nursing program after a break in enrollment in nursing courses must complete the following information and submit this form to the **Nursing Department Office** in order to be considered for re-enrollment in nursing courses.

Students requesting re-admission will be expected to meet the academic standards for nursing students as detailed in the ASU catalog and will be accepted on a “space available” basis. This form must be received in the Nursing Department Office no later than three months prior to the desired re-enrollment date.

Name _____ Student ID _____
Last First Middle

If previous enrollment was under a different name, please give name used at that time:

Give last class and semester attended: NURS _____ Semester _____ Year _____

Mailing Address _____
Street and Number

_____ City State Zip

Telephone Number _____
Area Number

I wish to be considered for re-admission to the nursing program beginning with the course, semester and track listed below:

Course Number NURS _____ Semester _____ Year _____

_____ Signature Date