

Adult and Graduate Studies RE-ENTRY REQUEST

This form should be completed by any former Adult and Graduate Studies Student who wishes to resume coursework in the Adult and Graduate Studies Program. PLEASE PRINT OR TYPE

Student ID#						
Name:			Birth date			
(If name was diff	erent at the time you attended plea	se specify here)	
Address:						
	Number and Street		City	State	Zip	
Phone: (Hm)	(Wk)_		(Ce	II)		
E-mail:						
	Have you completed any courses since withdrawal from SWU?					
	* If yes, you will need to submit an official transcript <u>before</u> being considered for readmit					
College:			-			
la	m requesting re-entry into the AGS	program to com	plete the following o	legree (choose c	ne):	
CURRENT PROGRA			C C	0	·	
Associate of Arts in General Studies (AA)			Master of Business Administration (MBA)			
Bachelor of Science in Human Services (BSHS)			Master of Business Administration w/Health Care (MBAHC)			
Bachelor of Science in Business Administration (BSBA)			Master of Education in Classroom Leadership (MEd)**			
Master of Science in Management & Leadership (MSML)Master of Education in Admin				Administration and	Supervision (MAS)**	
-	are available for you to complete your ence in Business Management (BSBM)		nts. These may not be		ations.	
preference:	offered both onsite and online with pose location)Greenville,Ce	·				
Are you intereste	ed in applying for: Financial Aid? Y	es No	Veteran Be	enefits? Yes	No	
understand that ar Coordinator to dev financial arrangen and/or financial ai	I will be subject to the curriculum, polic fter I receive notification that I am clear velop a degree completion plan, and wi nents for re-entry. <u>I understand that I ca</u> id offices. nal financial and academic clearances is	t to continue with the the Student Account of the Student Account of the student attend class un strengt stren	he re-entry process, I i bunts Office and/or th ntil final clearance is i	must work with th e Financial Aid Off	e Academic ice to make	
Signature			Date			
Return to:	Mail: SWU Academic Records, PO Box 1020, Email: Scan and email to records@swu.edu Fax: (864) 644-5914	SWU Box 1905, Centr	al, SC 29630			