

CALVIN

College

READMISSION APPLICATION

Applicants seeking readmission to Calvin are required to provide the following:

1. Completed form for Readmission.
2. Transcripts from all colleges previously attended.

Return to: Director of Admissions, Calvin College, 3201 Burton Street SE, Grand Rapids, MI 49546

LAST NAME					FIRST NAME					MIDDLE NAME					FORMER/OTHER NAME (Please circle)														
HOME ADDRESS—NUMBER AND STREET															CITY					COUNTY					STATE/PROVINCE				
ZIP/POSTAL CODE					COUNTRY					SOCIAL SECURITY NUMBER					M F GENDER														
AREA CODE			HOME PHONE			AREA CODE			WORK PHONE																				

E-mail Address: _____

Mailing or Temporary Address (if different from above)—Effective dates: From _____ To _____

Re-entry Date (year): _____ Fall Semester January Interim Spring Semester Summer

Class level at which you expect to enroll: First-year Sophomore Junior Senior Post Graduate Special

How long do you expect to study at Calvin College? _____

Housing plans: In college housing At home Other (specify) _____

Please list, in order of priority, the departments or programs in which you are considering majoring: (If undecided, list that first.)

1st _____ 2nd _____ 3rd _____

Date you discontinued Calvin: _____ Reason for discontinuing: _____

If you have ever been dismissed, suspended, or placed on probation by any school, college or university for academic or disciplinary reasons, missed a significant amount of time for other reasons, or if you have left voluntarily for a lengthy period of time, please check here. Explain your circumstances on a separate sheet of paper.

If you discontinued Calvin because of low academic standings, either upon request or voluntarily, what reasons can you give that you will be successful if readmitted? _____

Since leaving Calvin, state briefly your education and/or employment activities: _____

List any other colleges previously attended: _____ Major/Program: _____ Dates of Attendance: _____

Additional Applicant Information

Marital Status (optional): Single Married Other _____

Birth Date (optional): _____

Birth Place: City _____ State/Province _____ Country _____

Citizenship: U.S. Citizen U.S. Citizen Living Abroad Canadian Citizen Canadian /U.S. Dual Citizen

Other Citizenship: _____

If you do not have U.S. or Canadian citizenship please name the country in which your passport was or will be issued and complete the residency and immigration information below:

U.S. Resident—Your Alien Registration No.: _____

Canadian Resident—Please explain your immigration status: _____

Presently residing in U.S.—Please list your immigration status:

Visa Classification: _____ Visa Expiration Date: _____

What is your native language? _____

Ethnic Background:
(Providing this information is optional and will not be used in a discriminatory manner.)

African/Black/African American Hispanic/Latino White/Caucasian

Asian/Asian American Native American

Multiracial, please specify _____

Other, please specify _____

Church (optional): Name _____

Denomination _____

I certify that the information on this application is, to the best of my knowledge, accurate. I understand that Calvin College aims to provide an education which is Christian and is shaped by the Christian faith as reflected in the Reformed tradition. I desire the benefits of such an education, and I agree to conduct myself in accordance with the ideals for which Calvin College stands and to observe the rules governing student conduct.

Signature _____ Date _____

Calvin does not discriminate with regard to age, race, color, national origin, sex, or disability in any of its education programs or opportunities, employment or other activities. Questions pertaining to Title IX, which prohibits discrimination based on sex, and Section 504, which prohibits discrimination based on disability, may be directed to the Director of Admissions, Calvin College, 3201 Burton Street SE, Grand Rapids, Michigan, 49546, (616) 957-6106.