UNIVERSITY OF MASSACHUSETTS BOSTON
GRADUATE ADMISSIONS AND GRADUATE REGISTRAR
READMISSION APPLICATION

In order to be considered for readmission to a graduate program, you must submit this form with a current transcript of your graduate courses taken at UMass Boston and a statement of your reasons for requesting readmission to your graduate program director. If your readmission is approved, you must return this form, signed by the graduate program director, to this office with the readmission fee and all accumulated program fees.

The readmission process must be completed at least **30** days prior to the beginning of the semester for which you plan to enroll.

Eligibility for readmission is limited to students who were in good standing at the time of their withdrawal and who are within the time limit for completion of the degree. Readmitted students are subject to the policies and requirements in effect at the time of readmission.

Semester to Return _____ (sem/yr.) Program _____ Degree _____

SOCIAL SECURITY NUMBER _____

NAME _____
last first m.i. previous name

ADDRESS _____
street

_____
city state zip code phone number

Check here if this address is different from when you last attended _____

Reason for leaving _____

You are beyond your statute of limitations. Academic plan required. See attached form. _____

READMISSION FEE _____
PROGRAM FEES OWED _____
TOTAL AMOUNT OWED _____

Student's Signature _____ Date _____

Readmission approved _____ Readmission denied _____ (GPD, please check one)

Graduate Program Director's Signature _____ Date _____

Graduate Admissions & Graduate Registrar's Approval Signature _____

Date Form Received _____