

# APPLICATION FOR READMISSION WEST CHESTER UNIVERSITY

100 West Rosedale Avenue / West Chester, PA 19383 / 610-436-3411 / ugadmiss@wcupa.edu

Please read all instructions prior to completing application.

## A. STUDENT INFORMATION

Mr.  
 Legal Name  Ms. \_\_\_\_\_  
First Middle Maiden/Former Last

Legal Address \_\_\_\_\_  
Number Street

\_\_\_\_\_  
City State Zip (including last four digits)

County of Residence \_\_\_\_\_

Home Phone \_\_\_\_\_ / \_\_\_\_\_ Sex  Female  Male  
Area Code

Day/Work Phone \_\_\_\_\_ / \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Area Code

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Providing your SS# is optional. The University uses it for ID purposes only)

Pennsylvania Resident \_\_\_\_/\_\_\_\_  
Yes – Number of Years No

Citizenship \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_  
USA Other – Specify Country Visa Type Alien Registration Number

## B. ADMISSIONS INFORMATION Please complete appropriate items.

|                                    |  |               |
|------------------------------------|--|---------------|
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Fall Semester   | _____<br>Year |
| <input type="checkbox"/> Part-time |  |               |
| <input type="checkbox"/> Evening   | <input type="checkbox"/> Spring Semester | _____<br>Year |

West Chester University is required by federal and state agencies to collect the following data. This information is not part of the admissions process or decision. Please complete:

|  |   |
|--|---|
| <p>1. <b>What is your ethnicity?</b></p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p>2. <b>What is your race? Mark one or more areas to indicate what you consider yourself to be.</b></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> | <p>3. <b>Are you currently an active military member, veteran or dependent of military member/veteran? If so, please check your current status below.</b></p> <p><input type="checkbox"/> Active Military</p> <p><input type="checkbox"/> Active Reserve</p> <p><input type="checkbox"/> Inactive Reserve</p> <p><input type="checkbox"/> Veteran (VA Eligible)</p> <p><input type="checkbox"/> Retired Military</p> <p><input type="checkbox"/> Dependent of Military</p> <p>4. <b>Are you eligible for VA benefits?</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
|--|---|

## C. ACADEMIC MAJOR SELECTION

Refer to the list of academic programs (Section 1 of code sheet) for the code and name of your academic major(s). Degree and Curriculum you were last enrolled in at West Chester University:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Degree Curriculum/Major Curriculum Code No.

Degree and Curriculum you wish to change to: (if applicable)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Degree Curriculum/Major Curriculum Code No.

Year of high school graduation \_\_\_\_/\_\_\_\_  
Year GED

*(see reverse)*

Date you **first** enrolled at West Chester \_\_\_\_\_ / \_\_\_\_\_  
Month Year

**Last** semester attended at West Chester \_\_\_\_\_ / \_\_\_\_\_  
Semester Year

Did you leave the university with less than a 2.0 cumulative grade point average or were you on probation, dismissed, or had any disciplinary action taken against you while enrolled at West Chester University?

Yes  No *If yes, please refer to instructions for "Personal Statement."*

**D. TRANSFER INFORMATION**

Have you attended any other institution(s) since leaving West Chester? Yes No

If yes, please complete the section below. List in chronological order, most recent first, ALL colleges and universities you have attended. If you have attended more than two schools please provide the required information under separate cover.

|   |   |                    |
|---|---|--------------------|
| 1. Institution  | <input type="checkbox"/> Check here if currently enrolled |                    |
| Address   |   |                    |
| From: Month/Year  | To: Month/Year  | College Board Code |
| 2. Institution  |   |                    |
| Address   |   |                    |
| From: Month/Year  | To: Month/Year  | College Board Code |
| 3. Has disciplinary action been taken against you at any of the institutions attended?  |   |                    |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, please submit an explanation along with your application.</b> |   |                    |

**E. OTHER INFORMATION:**

Have you ever been convicted of a felony offense?  Yes  No

A conviction is an adjudication of guilt and includes pleas of nolo contendere (no contest). Please disregard minor traffic violations, offenses committed before your 18th birthday which were adjudicated in juvenile court under a Youth Offender Law, and any charges which have been expunged by a court or for which you successfully completed an Accelerated Rehabilitative Disposition Program.

A "yes" answer will be reported to the Pennsylvania Higher Education Assistance Authority (PHEAA) if the applicant receives PHEAA aid. A "yes" answer will not necessarily bar readmission to the University, but it may limit the ability to enroll in or complete certain academic majors/programs and may affect approval to live in university-owned or university-affiliated housing, should that be requested.

If yes, please state the felony offense, date of conviction and provide relevant information concerning the felony conviction:

---

---

---

---

**ADDITIONAL INFORMATION**

Are you or a member of your family employed by West Chester University?  Yes  No

If yes, \_\_\_\_\_  
Name Relationship Position at WCU

I certify that I have answered all applicable questions and that all information is true to the best of my knowledge. I understand that any deliberate falsification or omission of application data may result in denial of readmission or dismissal.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

(unsigned applications will be returned for signature)