

## Readmission Application

This application is provided for former Centenary students seeking readmission. Your application will be evaluated with the desire for you to become a graduate of Centenary College. Steps in the process include:

- Completion and submission of your readmission application
- Official transcripts of all college work since leaving Centenary
- If applying for financial aid, forward a student aid report (SAR) from your current FAFSA.

Please type or print clearly		
I Plan to Attend:	12 hours) Do you plan to file the FAFSA? 🗖 Yes 🗖 No	
Semester Enrolling at Centenary:	☐ Spring 20 ☐ Summer 20	
Intended Major:		
If you meet one of the requirements below, do you plan to live off campus?		
Personal Data		
Legal Name		
Legal Name	MIDDLE LAST	
Preferred Name	ocial Security Number	
☐ Male ☐ Female Date of Birth	Marital Status: ☐ Married ☐ Single	
Permanent Address Number & Street	CITY STATE ZIP	
	Cell Phone ( )	
	_Name of County or Parish	
Preferred Method of Contact:		
Citizenship:		
First Language, if other than English Coul	ntry of Birth Visa Type	
State of Legal Residence Length of Ti	me as Resident of this State Year(s) Month(s)	
If different from the above, please provide mailing address for all admission correspondence:		
Mailing Address		
Address to be used from	to	
Additional Information		
Ethnicity (check yes or no): Tes, Hispanic or Latino (identify below) No, not Hispanic or Latino		
$\square$ Mexican, Mexican American, Chicano $\square$ Puerto Rican $\square$ Cuban $\square$ Other Spanish/Latino		
Race (check all that apply) $\square$ White $\square$ Black or African American $\square$ Asian $\square$ American Indian or Alaska Native		
☐ Native Hawaiian or oth	er Pacific Islander	
Religious Preference	Home Church	

## **Educational Data**

NOTE: All applicants must provide official transcripts from all colleges/universities attended. Unofficial copies may be used by the Admission Office for admission consideration, however, final credit evaluation will be completed with official transcripts. Official transcripts are those mailed directly from the former institution to the Centenary College Admission Office.

List all colleges, universities, and other institutions of higher education attended. Please have an official transcript from each.

COLLEGE/UNIVERSITY	LOCATION	DATES OF ATTENDANCE
Family Data (Complete this section ONLY if yo	u are a dependent of parents. Leave b	lank if not.)
Parent 1 Full Name	Parent 2 Full Name	
Is This Person Living? ☐ Yes ☐ No	Is This Person Living? ☐ Yes	□ No
Home Address (if different from yours)	Home Address (if different f	rom yours)
Email	Email	
Other		
I last attended Centenary from	to	
Academic Advisor		
What was your reason for leaving Centenary?		
What have you been doing since you left?		
Please state why you would like to return to C	entenary	
I certify that I have completed this application for accurate. If I enroll at Centenary College, I hereby College and to accept the obligations imposed up	agree to abide by the established rule	
<b>Louisiana Residents:</b> Upon submission of this appli academic records on file with the Louisiana State D		
Signature of Student	Date .	
Centenary College encourages application for admigender, race, color, age, religion, disability, sexual or loan programs or other college programs, policies a tation Act of 1973 and the Americans with Disabiliti effort to accommodate the needs of its students with	rientation, or national or ethnic origin in and activities. In compliance with section es Act of 1990, Centenary College will r	n its admissions policies, on 504 of the Rehabili-