

New Jersey City University
Division of Student Affairs
Office of the Dean of Students
Gilligan Student Union Building, Room 127
2039 Kennedy Boulevard, Jersey City, NJ 07305
201-200-3525 ~ 201-200-3583 (fax)
APPLICATION FOR READMISSION

This application is intended for a student who is seeking readmission to New Jersey City University, has not been enrolled in the university for more than three (not including winter intersessions or summer sessions), and whose most recent NJCU grade point average (GPA) is below the institution's academic standards as indicated on the Academic Standards policy.

Please note: A readmitted student who fails to meet the following academic standards will be subject to the requisite sanctions as indicated. A readmitted student may have a limit placed on his/her approved credits and/or may be required to retake specific courses appropriate to his/her major.

READMISSION APPLICATIONS ARE ACCEPTED NO LATER THAN NOVEMBER 1ST FOR THE SPRING SEMESTER AND NO LATER THAN JULY 1ST FOR THE FALL SEMESTER. PLEASE NOTE: READMITS ARE NOT ACCEPTED FOR SUMMER SESSION.

Name:	Gothic ID#:	
Address:		
Home Phone #:	Cell Phone #:	Email:
Semester and last year of enrollment:		
Most recent Cumulative Grade Point Average:		

1. Is this your first separation from New Jersey City University? **Yes** _____ **No** _____

If no, please explain: _____

2. What was your major when you left the University? _____

3. If readmitted, what will be your field of study? _____

4. If different, explain change: _____

5. Have you attended any other institutions since leaving NJCU? **Yes** _____ **No** _____

If yes to Number 5, please specify the institutions/programs and the dates attended in the table below. Please ensure that related transcripts are forwarded to the Office of the Dean of Students.

Institution/Program	Dates Attended	Degree/Certificate

6. If readmitted, when do you plan to re-enter the University?

Fall/Yr. _____ Spring/Yr. _____

Full-Time _____ Part-Time _____

7. List the courses (course number, title and credits) that you would like to take should you be readmitted.

Course Number	Course Title	Number of Credits
1.		
2.		
3.		
4.		

Please answer the following on a separate piece of paper:

1. Explain in detail why your grade point average fell below the acceptable academic standard. Include relevant health issues and/or academic and personal problems that prevented your from being successful. Please attach all related and necessary documentation.
2. What have you been doing since you left school that would support your request to return?
3. What plans do you have to help you to achieve academic success should you be allowed to return to New Jersey City University?

I understand the provisions of the academic standards policy as indicated on the attached. I will follow my academic readmission agreement to improve my academic performance.

Print or type name: _____

Signature/Date: _____

Administrative Review

Transcript Attached

Readmission Approved **Readmission for _____ Semester**

Readmission Denied

Comments:

Staff Signature/Date: _____