



Name \_\_\_\_\_ Class Year \_\_\_\_\_

Dartmouth ID \_\_\_\_\_ Hinman Box \_\_\_\_\_

Date \_\_\_\_\_

Address (mailing address at which you can be reached during your withdrawal)

\_\_\_\_\_

\_\_\_\_\_

Phone numbers (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Alternate e-mail address \_\_\_\_\_

Term for Which Readmission is being sought \_\_\_\_\_

***Please note that completed applications are due 60 days in advance of the first class day of the term in which you wish to enroll. Your responses to the questions below should be candid and complete. Your readmission request will be reviewed by the Undergraduate Deans Office. You are also required to submit two letters of recommendation in support of your readmission.***

1. Why and when did you leave Dartmouth?
2. What have you done during your time away from the College?
3. Why do you believe you are now ready to return to school and complete your education in an uninterrupted manner? What, if any, changes have you made to your academic goals or plans?

4. A suspension from the College is partly imposed to encourage reflection and growth. What have you learned about yourself during your time away? What will be different about your choices once you are reenrolled?

5. Who will be writing your letters of support? Why did you ask this person to write on your behalf?

Recommender 1 Name \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

Recommender 2 Name \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

6. How can your dean support your successful transition back to Dartmouth?

7. To the best of your ability, please list the classes you plan to take in the first three terms you are back. Course number, Title, and Term (please check the ORC to ensure the course is offered that term).

Signed: \_\_\_\_\_

**For office use only:**

Date received: \_\_\_\_\_ Confirmation letter mailed: \_\_\_\_\_

Academic standing at time of suspension/withdrawal: \_\_\_\_\_

Academic standing for readmission term: \_\_\_\_\_

Dean: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Reassigned Dean: \_\_\_\_\_

Pending COS Hearing: Yes \_\_\_\_\_ No \_\_\_\_\_ Completed Course Count: \_\_\_\_\_

If readmission is denied, brief rationale: