



The Graduate School

RH Box 31
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Alamosa, CO 81102

Phone: 719-587-8152 Fax: 719-587-8222 Toll-Free: 866-407-0013
Email: ascgrad@adams.edu

Special Readmission Form

Please fill out, carefully and completely, in ink. You will be held responsible for errors or omissions on this form.
If you have not taken classes for more than three (3) semesters DO NOT complete this form. You must complete a new application packet.

For which Term are you applying?

Spring Summer Fall Year: _____

When were you previously enrolled at ASC?

Spring Summer Fall Year: _____

Major: _____

Social Security Number: _____ Birth date ____/____/____ Female Male
Month Day Year

Nation of Citizenship: _____ If not U.S. give temporary Visa # _____ Expiration Date: _____

Full Legal Name: _____
Do NOT use nicknames Last Name First Name Middle Name

Previous name(s): _____

Mailing Address: _____
Street or Box Number City State Zip Code

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____ (optional)

E-mail address: _____

THIS SECTION MUST BE COMPLETED IF YOU ARE CLAIMING IN-STATE TUITION CLASSIFICATION

Failure to do so will result in your classification as a non-resident. Students who claim a change in tuition classification must contact the Records Office for further information. Dependents of non-resident active duty military personnel stationed in Colorado may request a tuition adjustment to in-state rates. For information, contact your Military Base Education Office.

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|---|-----------------------|-------------------|
| Dates of continuous physical presence in Colorado (mo/yr) | From ____/____/____ | To ____/____/____ |
| Dates of extended absences (more than one month) from Colorado | From ____/____/____ | To ____/____/____ |
| Reason for absence | _____ & _____ | |
| List last three years Colorado Income Taxes have been paid | _____, _____ & _____ | |
| Dates of employment in Colorado (mo/yr) | From ____/____/____ | To ____/____/____ |
| Dates Colorado driver's license was first issued (mo/yr) | From ____/____/____ | To ____/____/____ |
| Dates current Colorado driver's license was issued (mo/yr) | From ____/____/____ | To ____/____/____ |
| List last three years of Colorado motor vehicle registration | _____, _____, & _____ | |
| Date of Colorado voter registration (mo/yr) | From ____/____/____ | To ____/____/____ |
| Date of purchase/lease of any Colorado residential property (mo/yr) | From ____/____/____ | To ____/____/____ |
| Dates of military service, if applicable (mo/yr) | From ____/____/____ | To ____/____/____ |

Failure to answer the following questions will delay the application process.

Have you ever been convicted of a crime, made a plea of guilty, accepted a deferred judgment, been adjudicated, or been required to register as a sex offender? (Misdemeanor traffic offenses are exempt): Yes No If YES, please include a letter of explanation.

Have you ever been subject to disciplinary action, left with disciplinary action pending, or been dismissed from any institution of higher education? Yes No If YES, please attach a sheet explaining the circumstances.

The following selective service question must be answered to comply with Colorado State law:

If you are male, born after December 31, 1959, are you registered with the selective service? Yes No

I hereby request readmission to Adams State College. I have been accepted to ASC and plan to use this form only for readmission. I certify that all information I have provided (including statement of Selective Service Registration Status) is true.

(Signature)

(Date)