



GEORGETOWN UNIVERSITY  
School of Continuing Studies

Office of Academic Affairs & Compliance  
School of Continuing Studies  
Georgetown University  
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Washington, DC 20001  
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### Re-Enrollment Request Form

This re-enrollment request form must be completed by degree candidates who withdrew or were withdrawn for failure to register for courses and now desire to resume their previous studies. However, if any of the terms outlined in the SCS Student Handbooks for which re-application apply, this form should not be used. Please note the following:

- Prior acceptance to a program in SCS does not guarantee future acceptance to that same or another program.
- Time limits to degree completion (from original admission): Bachelor’s degree candidates have 10 years, Professional Studies degree candidates have 5 years, Graduate Liberal Studies degree candidates have 7 years.
- All non-U.S. citizens must work with the OGS for all immigration documentation needs. Re-enrollment in an academic program does not guarantee the conferral of visa status.
- Return this form with your essay by the dates below. Requests received after the deadline will not be considered.  
Fall Return – August 15                      Spring Return – December 10                      Summer Return – May 5

#### Personal Information

Name (last, first, middle initial):		GU NetID:	GU Student ID:
Permanent Home Address:			
City:	State:	Zip:	Country:
Non-Georgetown Email Address:		Former Name(s):	
Primary Telephone:		Secondary Telephone:	
Country of Citizenship:			

#### Matriculation & Academic Standing Information

<b>Term Admitted</b> Spring * Summer * Fall, Year: _____	<b>Last Term Enrolled</b> Spring * Summer * Fall, Year: _____	<b>Requested Term of Re-Enrollment</b> Spring * Summer * Fall, Year: _____
Academic Program and Department _____		
Number of credits earned to date _____		
Were you in good academic standing when you left your studies? ( ) Yes ( ) No      Last cumulative GPA _____		
Have you attended any college or university since the last enrolled term at G.U.? ( ) Yes ( ) No <input type="checkbox"/> If yes, you must re-apply to the School of Continuing Studies.		
Have you ever been suspended or dismissed or received a leave of absence from G.U. or any other institution of higher education for any reason? ( ) Yes ( ) No      If yes, please attach an explanation.		
<b>Essay:</b> Please attach a separate document briefly explaining the reasons you left your studies, why you are returning, and how you know that you are now prepared to successfully resume your studies.		

I certify all information on this form is complete and true, and I meet the conditions that make me eligible to request re-enrollment.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Associate Dean Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Academic Affairs & Compliance Signature

\_\_\_\_\_  
Date