LOUISIANA TECH UNIVERSITY

A member of the University of Louisiana System Intent to Re-enroll Form

For students taking Online Classes Only

Office of Admissions P. O. Box 3178 Ruston, LA 71272

Student Information			
Legal Name:			
Date of Birth:			
Mailing Address:			
	Number and S	Street	
City Pa	rish/County	State	Zip Code
Telephone:	<u>,</u>		,
Are you a US Citizen?	YesNo		
Readmission Information			
Last at Tech:	Fall Winter Spr	ingSummer - Year last atter	nded:
I am re-enrolling for the:	FallWinterSpr	ingSummer - Year to attend	l:
will be allowed to enroll a	riginally as a visiting student tal a maximum of three quarters be ne regular admission procedure our enrollment.	yond their initial quarter of er	rollment.
Academic Information Have you attended any collectifyes, please list below: Name of College	ge or university since your last quarte City and State	Dates Attended Hours/	Degree
		(Mo/Yr – Mo/Yr) Credits	Earned
state law R.S.17.3151 that: I am registered with the Selection III am registered with III am registe	ty of perjury in accordance with the requirement ctive Service System: (check one) , indicate reason: 18 years of age e er of the armed forces of active duty	YesNoBorn before 1960Other, explain:	
Date:	Applicant's S	ignature:	