

LOUISIANA TECH UNIVERSITY

A member of the University of Louisiana System

Undergraduate Application for Re-Admission

(Previously Enrolled Students – Out One Quarter Only)

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

Phone: 318-257-3036

Fax: 318-257-2499

Student Information

Legal Name: _____

Social Security Number: _____

Date of Birth: _____

Mailing Address: _____

Number and Street

City _____ Parish/County _____ State _____ Zip Code _____

Telephone: _____

Are you a US Citizen? Yes No

Readmission Information

Last at Tech: _____ Fall _____ Winter _____ Spring _____ Summer - Year last attended: _____

I am re-enrolling for the: _____ Fall _____ Winter _____ Spring _____ Summer - Year to attend: _____

I will be taking courses at: _____ Main Campus _____ Barksdale

Field of Study: _____ College of Business
_____ College of Applied & Natural Sciences
_____ College of Education
_____ College of Engineering and Sciences
_____ College of Liberal Arts
_____ Basic and Career Studies (Undecided)

Proposed Major: _____

Academic Information

Have you attended any college or university since your last quarter at Tech? Yes No

If yes, please list below:

Name of College	City and State	Dates Attended (Mo/Yr – Mo/Yr)	Hours/ Credits	Degree Earned
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Selective Service

I hereby swear or affirm under penalty of perjury in accordance with the requirements of the military service act, and the requirements of state law R.S.17.3151 that:

I am registered with the Selective Service System: (check one) Yes No

Not Applicable, indicate reason:

Under 18 years of age

Female

Member of the armed forces of active duty _____

Born before 1960

Other, explain: _____

Date: _____

Applicant's Signature: _____