



# Bethany College

## Application for Re-Admission

Name: \_\_\_\_\_ Former Last Name: \_\_\_\_\_  
Last First M.I. (if applicable)

Date of Birth: \_\_\_\_\_ Gender: \_\_\_M \_\_\_F

Permanent Mailing Address: \_\_\_\_\_  
Street City State Zip code

Cell Phone: \_\_\_\_\_

Citizenship: U.S\_\_\_ Other\_\_\_

If a foreign citizen, please list your country of citizenship: \_\_\_\_\_ and current Visa type: \_\_\_\_\_

When were you last enrolled at Bethany College: \_\_\_Fall \_\_\_ Spring

Year: \_\_\_\_\_ Major: \_\_\_\_\_

Will you need campus housing: \_\_\_Yes \_\_\_ No

List all colleges/universities that you attended since leaving Bethany College:

\_\_\_\_\_

Office use only:

\_\_\_Financial Aid \_\_\_Registrar/Academics \_\_\_Accounting \_\_\_Housing  
\_\_\_Student Services

Signature: