University of California, Berkeley

Undergraduate Application for Readmission

Please read these **INSTRUCTIONS** carefully. Complete the application and submit it directly to your College/School advising office.

There is a non-refundable application fee of \$70. Please select your payment method:

Term for which you are Re	eapplying:	Fall 2	.0	Spring 20					
UC Berkeley Student ID Number:				Date of Birth:					
Name as last Registered a	t UC Berke	eley (If your n	ame has chan	ged, please submi	it a <u>Petition f</u>	or Change of	Name):		
Last Name,			Fi	First			Middle		
Contact Information:									
Email Address Mailing Address:				Local Phone			Permanent/Home Phone		
Street Permanent/Home Address:				City			State	ZIP	
			City			State	ZIP		
First Enrolled at UC Berkel	ey:	Fall	Spring	Summer	Year				
Last Enrolled at UC Berkel	ey:	Fall	Spring	Summer	Year				
was last enrolled at UC Berl	keley:		College or S	chool			Major		
am reapplying to UC Berl	kelev:		Conege of Si	LNOOI		,	viajoi		
			College or S	College or School			Major		
expect to graduate:	Fall	Sprin	g Su	Summer Year			Approval of Expected Grad Terr Adviser Initials:		
I have not attend	ed/am no	t attending a	nother institu	tion while absent	from UC Be	rkeley			
f you have attended anot	her colleg	e or universit	y while absen	t from UC Berkel	ey, please pr	ovide the fol	lowing:		
						Dates: _			
Institution		City	/	State	ZIP		From	То	
Institution		City	, ,	State	ZIP	Dates: _	From	То	
Applicant's Signature:						Date:			
Signature of Dean or Dean's Representative:						Date:			
	Dean's Approval Required for All Students								
Blocks Yes	No		Office of the	Registrar Use Onl	У				
Payment							Staff Initials		