



APPLICATION FOR READMISSION

Name		ID#	Date
Mailing Address			
City		State	Zip Code
Telephone: ()	Cell phone: ()	E-mail:	
Dates you previously attended		From	To
Semester to which you seek readmission		Do you seek <input type="checkbox"/> Full-time or <input type="checkbox"/> Part-time?	
Why did you leave college?			
Previous Curriculum		Readmission curriculum requested	
Have you attended any college(s) since leaving Cobleskill?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, complete the following:			
College/University		Dates Attended	Credits Earned/GPA
** If yes, please provide an official transcript to the Office of Admissions.			
Have you been dismissed and/or suspended from a college for disciplinary reasons?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will you require housing at Cobleskill?		Yes	No <input type="checkbox"/>
_____		<i>Student Signature</i>	

A \$50 non-refundable fee is required prior to processing the application for Readmission. Please make check or money order payable to: SUNY Cobleskill.

Students that have been suspended are required to earn a “C” or better in at least 6 credit hours of coursework.

Please forward official College transcripts for all credit-bearing courses taken since you last attended SUNY Cobleskill.

Please return the completed Application and official transcripts to:

**Office of Admissions
 State University of New York
 College of Agriculture and Technology
 Cobleskill, NY 12043
 (518) 255-5525**

FOR COLLEGE USE ONLY – PLEASE DO NOT COMPLETE BELOW THIS LINE

Cobleskill GPA

List Holds

Financial Hold Amount \$

ROUTING FOR COMMENTS AND RECOMMENDATIONS

Res. Life/Student Affairs

(Initial)

Financial Aid

(Initial)

ADMISSIONS OFFICE ACTION

Comments and final Recommendations

Reinstatement recommended

Reinstatement not recommended

Signature

Date

AW / ARW

AP / AP

DA / DA

DP / DP

AA / ARSGPA

Other: