



TEXAS A&M
UNIVERSITY
KINGSVILLE

OFFICE OF THE REGISTRAR
MSC 105, 1050 W. SANTA GERTRUDIS AVE
KINGSVILLE, TEXAS 78363-8202
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www.tamuk.edu

REQUEST FOR READMIT AFTER ONE YEAR NON-ATTENDANCE FORM
(Please Use Black or Blue Ink Only)

This form is required of all students who have not been enrolled (taken a course) at Texas A&M University-Kingsville (TAMUK) during the past year and now wish to re-enroll. **NOTE:** If you have not attended TAMUK for 2 or more years, you will need to apply for re-admission with the appropriate admitting office.

Semester requesting to return: ___ Fall ___ Spring ___ Summer 20___ Student ID # _____

(Last Name) (First Name) (Middle Initial) Date of Birth

Street Address or P.O. Box (Apt. #) City State Zip Code

Phone: (_____) _____ Email Address: _____

Name under which previously attended (if different than above): _____

Classification (circle one): UG GR DR Major(s): _____

(UG ONLY) Minor(s): _____ Concentration (if applicable): _____

Last term of attendance at TAMUK: ___ Fall ___ Spring ___ Summer Year: _____

Have you received the Bacterial Meningitis Vaccination in the last five (5) years? Yes No
If yes, date taken? _____

Were you in good academic standing when you left TAMUK? Yes No
If no, you may be required to obtain an approval letter from your advisor. If required, the Office of the Registrar must receive the approval letter prior to processing the Request for Reinstatement.

Have you attended another institution since your last enrollment at TAMUK? Yes No

If yes: Name of Institution(s): _____ Date(s) Attended (From – To): _____

Note: It is your responsibility to forward your official transcript from any/all college(s) you attended since your last enrollment at TAMUK. Please be sure all transcripts are mailed to the Office of Admission or hand delivered in a sealed envelope to the Javelina Enrollment Services Center located in the Memorial Student Union Building.

I certify that the answers given on this form are correct and complete to the best of my knowledge. I understand that false statements could result in my dismissal from Texas A&M University-Kingsville.

Signature: _____ **Date:** _____

Office of the Registrar's Use Only: Processed by: _____ Date: _____
03/09/2016