

Selma University
OFFICE OF ACADEMIC AFFAIRS
1501 LAPSLEY ST.
SELMA, ALABAMA 36701

RE-ADMISSION APPLICATION

1501 Lapsley St.
(334) 872-2533
(334) 875-0002 –Fax

Please read carefully and print legibly with a black ink pen. Answer each question correctly.

Last Name: _____ First Name: _____ MI: _____
Maiden Name: _____ Address: _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: _____ Cell Phone: _____
Email Address: _____
Social Security Number: _____ - _____ - _____ Birthdate: _____ - _____ - _____

Check only those that apply to you

Gender: () Female () Male Veteran/Active Military: () yes () no
Ethnicity: () African American () Caucasian () Hispanic () other _____
Marital Status: () Single () Marriage () Separated () Divorced () Widow () Widower
Are you a Christian? _____
Have you ever been convicted of a felony? Yes/No If yes, explain _____
Were you dismissed for disciplinary reasons? Yes/No If yes, explain _____
Major during previous enrollment _____
Do you plan to change your major? _____

APPLICATION MUST BE APPROVED BY FINANCIAL AID

APPROVED/DENIAL

Reason for Denial _____

Initials: _____

DISCIPLINARY MUST BE APPROVED BY STUDENT AFFAIRS

APPROVED/DENIED _____

Initial: _____

By signing, I do hereby certify that the above information is accurate to the best of my knowledge.

Signature: _____ Date: ___/___/___