



Office of the Registrar Application for Readmission

Personal Information:

First Name: _____ MI: _____ Last Name: _____

XUID: _____ SSN ord [(X)8UIUI I.1:

Last Date of attendance at Xavier: _____

Please choose one below:

Have you attended a college or university since Xavier? ___ Yes ___ No

*** If you have attended another college, you must have an official transcript sent to the Office of the Registrar immediately. ***

Name of Institution: _____

Name of Institution: _____

Name of Institution: _____

Career Information:

Please choose one below:

Are you currently in the military? _____ Yes _____ No

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