SOUTHERN WESLEYAN UNIVERSITY
AGS PROGRAM
RE-ENTRY REQUEST

PLEASE PRINT OR TYPE

NAME:_____ SS# Or Student ID# _____

ADDRESS: _____

_____

PHONE: (HOME)_____ (WORK)_____

E-MAIL ADDRESS: _____

I am requesting re-entry into the AGS program to complete the following degree:

_____ Associate of Science in Business (ASB)

_____Associate of Arts (AA)

_____Bachelor of Science in Business Administration (BSBA)

_____Bachelor of Science in Management (BSM)

_____ Master of Science in Management (MSM)

_____Master of Business Administration (MBA)

_____Master of Education (MEd)

Have you completed any courses since withdrawal from SWU? _____
College:_____
If so, you will need to submit a transcript for this work.

Are you interested in applying for:	Financial Aid?	Yes_____	No_____
	Veteran Benefits?	Yes_____	No_____

Will your employer reimburse you for tuition? Yes_____ No_____ If so, what percentage?_____

I understand that I will be subject to the curriculum, policies, and requirements currently in place for the program I am entering. I understand that I must work with the student services coordinator to arrange entry with an appropriate core group (or other classes, as needed), and with the AGS accounting office and/or the financial aid office to make financial arrangements for re-entry. I understand that books will not be mailed and re-entry cannot be approved until clearance is received from the accounting and/or financial aid offices. I also understand that I cannot attend class until these clearances have been received.

Signature_____ Date_____

Return to: SWU Academic Records
PO Box 1020
SWU Box 1905
Central, SC 29630
Fax # (864) 644-5971

06/08