

Readmission for Degree

University Registrar 160 Funkhouser Drive 10 W.D. Funkhouser Building Lexington, KY 40506-0054 (859) 257-7173 www.uky.edu/registrar/

FOR OFFICIAL USE ONLY	
Date Received	No Fee Required - Readmit for Degree

COMPLETE ALL FIELDS BELOW		
1. NAME		2. UK ID
First Name Middle Name Last N	Same (II, III, IV, etc.)	or SOCIAL SECURITY NUMBER
Do not use nicknames.		of SOCIAL SECONT I NUMBER
3. DATE OF BIRTH	Day Year	
Nionth	Day Year	
4. SEMESTER OF INTENDED GRADUATION 5. DEGREE / MAJOR / MINOR		
Fall Spring Summer B.A. B.S Other		
	MAJOR	MINOR
6. HAVE YOU ATTEMPTED ANY COLLEGE WORK AT ANOTHER INSTITUTION SINCE YOU LAST ATTENDED UK? YES NO If YES, list institution(s) Dates Attended: From MONTH/YEAR MONTH/YEAR If YES, has your official transcript been sent to Undergraduate Admissions? YES NO		
7. PERMANENT ADDRESS		8. E-MAIL ADDRESS
Street		
City State Zip		9. PHONE
10. I certify that the information given on this application is complete and correct. Deliberate falsification may subject me to immediate dismissal from the University of Kentucky and revocation of credits or degrees earned. All applicants meeting the appropriate academic requirements and technical standards shall be considered equally for admission to any academic program, regardless of economic or social status and will not be discriminated against on the basis of race, color, ethnic origin, national origin, creed. religion, political belief, sex, sexual orientation, marital status, age, veteran status, or physical or mental disability.		
APPLICANT'S SIGNATURE DATE		

SEND COMPLETED APPLICATION TO:

Kayla McCalla University Registrar 160 Funkhouser Drive 10 W.D. Funkhouser Building Lexington, KY 40506-0054 Fax: 859-257-7160 registration@uky.edu