

Fairleigh Dickinson University

APPLICATION FOR READMISSION

This application is to be completed by students who previously attended Fairleigh Dickinson University. **No application fee is required.**

Please type or print.

I. PERSONAL DATA

Last Name _____ First _____ Middle _____

Maiden Name (if applicable) _____

Permanent Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Evening Phone (_____) _____

Cell Phone (_____) _____ E-Mail _____

Social Security No. Date of Birth _____
Month Day Year

Gender: Male Female

II. ENROLLMENT INFORMATION

I am reapplying as:

Undergraduate/Full-Time Undergraduate/Part-Time Graduate/Full-Time Graduate/Part-Time

I plan to enter FDU:

Fall 20____ Spring 20____ Summer I 20____ Summer II 20____ Summer III 20____ Winter Session 20____

My preferred campus is:

Metropolitan Campus (Teaneck, NJ) College at Florham (Madison, NJ) Off-Campus Site _____

My intended major is: _____ Concentration (if applicable) _____

III. EDUCATIONAL HISTORY

Please provide information about your previous enrollment at FDU:

Major _____ Concentration _____

Campus Attended _____ Dates Attended _____

Please list any college or university you have attended since leaving FDU:

School Name	City/State	Credits Earned	Dates Attended
_____	_____	_____	_____ from _____ to _____
_____	_____	_____	_____ from _____ to _____

I certify that, to the best of my knowledge, the information provided is accurate and complete. I understand that any unanswered questions will delay the processing of my application and may require its return for clarification.

Signature of Applicant _____

Date _____

Please mail or fax your completed application to the appropriate Admissions Office at the campus where you plan to attend:

Undergraduate Adult & Part-time Admissions
METROPOLITAN CAMPUS
1000 River Road, H-DH1-05
Teaneck, NJ 07666
Phone: 201-692-2551
Fax: 201-692-7359

Graduate Admissions
METROPOLITAN CAMPUS
1000 River Road, T-KB1-01
Teaneck, NJ 07666
Phone: 201-692-2554
Fax: 201-692-2560

Undergraduate & Graduate Admissions
COLLEGE AT FLORHAM
285 Madison Ave., M-RI0-01
Madison, NJ 07940
Phone: 973-443-8900
Fax: 973-443-8088

For Internal Use Only

Approved by (signature) _____ Date _____