University of Oregon Undergraduate Reenrollment Application

Return to:
Office of the Registrar
registrar@uoregon.edu

Complete this form if you are a formally admitted undergraduate or post-baccalaureate student who has been away from the University four or more terms (not including summer sessions). If you are an international student, contact the Office of International Programs (http://international.uoregon.edu/) regarding immigration documents.

Name: _____ UO ID Number: _____
Last First MI

Previous name(s): _____

Mailing Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Email: _____ Phone: ( )

Residency Classification

Residency Classification stipulates that students who last attended as non-residents or who were residents, but subsequently left the state **for 12 months or more**, will be classified as non-residents for tuition purposes. If you wish to review your non-Oregon residency classification, **you must** submit a Residence Information Affidavit.
If you have questions about residency rules or need the Residence Information Affidavit, the form and UO Residency Officer contact information is available at https://admissions.uoregon.edu/residency

List all the states/countries you've lived in since attending the UO and the length of time lived in each one by date: _____

Other Colleges Attended

If you attended another college or university since you last attended the UO, you are required to submit official transcripts from each institution to the UO Office of the Registrar. Failure to do so may result in the cancellation of your re-admission or registration. Transfer credit earned will affect your registration, degree audit and graduation. To find your registration time and other information about registration, visit the Office of the Registrar homepage at http://registrar.uoregon.edu/.

Renrollment Term: check one term

☐ Fall 20 _____ ☐ Winter 20 _____ ☐ Spring 20 _____ ☐ Summer 20 _____

I certify that all information given on this application is correct and complete to the best of my knowledge:

Signature: _____ Date: _____

OFFICE USE ONLY

Address ❑	Holds ❑	Academic Standing ❑	Major ❑	Last Att ❑	SGASTDN ❑	Letter ❑

Comments:

Received By: _____ Date: _____