



Xavier University of Louisiana

College of Pharmacy - Application for Readmission

Office of Student Affairs • 1 Drexel Drive • New Orleans, LA 70125 • (504)520-5379

This form must be completed if you are a former Xavier student who wishes to return to the College of Pharmacy. This form and all required documents or information must be submitted to the College of Pharmacy, Office of Student Affairs at least 30 days prior to the beginning of the term for which you wish to enroll.

Name: _____ Xavier ID or SS Number: _____

Current Address: _____ Email: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Marital Status: single married widowed divorced Intended Major: _____

Prior Major: _____ For what term do you wish readmission? _____

Reason for Leaving: Academic Dismissal Disciplinary Dismissal Financial Difficulties Illness

Other (please specify): _____

If you were on probation or dismissed for academic or disciplinary reasons, you must complete the request for readmission form and a probationary action plan.

Last Date of Attendance at Xavier: _____ Attended college since Xavier? Yes No

Name of Institution: _____ Dates Attended: _____

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

Have you been: In the military? Yes No Length of Time: _____

Employed? Yes No Length of Time: _____

Employer's Name: _____

If none of the above statements apply, please state briefly what you have been doing since you left Xavier.

STUDENTS DISMISSED OR ON PROBATION AT THE TIME OF DEPARTURE FROM XAVIER: The required documents and materials, including the report from Xavier's Counseling Center, must be received by the College of Pharmacy, Office of Student Affairs at least thirty days prior to the registration date of the semester you wish to return.

Signature

Date