



# SAINT XAVIER UNIVERSITY

## CHICAGO

3700 West 103rd Street • Chicago, IL 60655  
Phone (800) 462-9288 • Fax (773) 298-3076

## ORLAND PARK

18230 Orland Parkway • Orland Park, IL 60467  
Phone (708) 802-6200 • Fax (708) 802-6202

### APPLICATION FOR READMISSION

**This form must be completed by students who previously attended classes as an admitted student at Saint Xavier University but have NOT enrolled within the last year.**

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_  
(last) (first) (middle) (maiden/other)

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phones: Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ Date of birth \_\_\_\_\_

Are you a United States Veteran? Yes \_\_\_\_\_ No \_\_\_\_\_

Previous dates attended at SXU (include month/year) From \_\_\_\_\_ To \_\_\_\_\_

Semester returning to SXU (include month/year) \_\_\_\_\_ Major \_\_\_\_\_

Please select one \_\_\_\_\_ full time (12 + S.H.) \_\_\_\_\_ part time (6-11 S.H.) \_\_\_\_\_ part time (1-5 S.H.)  
Campus location \_\_\_\_\_ Chicago \_\_\_\_\_ Orland Park

Estimated GPA upon leaving SXU (If cum GPA is below 2.0, please include complete explanation in space below and/or back of sheet.) \_\_\_\_\_

Institution(s) attended since leaving SXU (Official transcripts from each institution must be sent to the SXU Admission Office before your application for readmission will be reviewed.)

### Institution

### Dates of Attendance

\_\_\_\_\_  
\_\_\_\_\_

**Please write a complete statement** explaining why you left SXU and why you desire to be readmitted. Be as specific as possible. Use the back of this page for any additional explanation.

\_\_\_\_\_  
\_\_\_\_\_

**I understand that withholding information requested on this form or giving false information may make me ineligible for readmission to the University or subject to dismissal. I certify that the statements I have made are correct and complete.**

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)