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CAMPUS	ADDRESS	TELEPHONE
HIALEAH	1776 W. 49th St.	33012-2918
HOMESTEAD	500 College Terrace	33030-6009
INTERAMERICAN	627 S.W. 27th Ave.	33135-2966
KENDALL	11011 S.W. 104th St.	33176-3393
MEDICAL CENTER	950 N.W. 20th St.	33127-4622
NORTH	11380 N.W. 27th Ave.	33167-3495
WEST	3800 N.W. 115th Ave.	33178-4856
WOLFSON	300 N.E. 2nd Ave.	33132-2296

COLLEGE ADMISSIONS AND REGISTRATION SERVICES

APPLICATION FOR RE-ADMISSION

PLEASE TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK ALL INFORMATION ON THIS APPLICATION

College credit Vocational credit (post-secondary adult vocational - PSAV)

Part I - Personal Information

Name (last, first, middle) _____
 Social Security number _____ Date of birth _____
 E-mail _____ MDC student number _____
 Local address _____
 Phone (home) _____
 Phone (cellular) _____ Phone (work) _____

Part II - Enrollment Information and Degree Information

- I have not attended any other colleges or universities since I last enrolled at Miami Dade College.
 I have attended the colleges or universities indicated below since I last enrolled at Miami Dade College.

NAME OF INSTITUTION	STATE	COUNTRY	ATTENDANCE DATES	CREDITS/DEGREE

Check the degree or program you intend to pursue at Miami Dade College:

- Associate in Arts (A.A.) Associate in Science (A.S.) Associate in Applied Science (A.A.S.) Bachelors degree
 Certificate program Vocational program Undecided Non-degree seeking

Intended major _____ Program code (see program listing) _____

I plan to attend Miami Dade College beginning:

Month _____ Year _____ Term: Fall (Aug.-Dec.) Spring (Jan.-Apr.) Summer (May-July)
 Location preferred: Hialeah Homestead InterAmerican Kendall Medical Center North
 West Wolfson Virtual College Outreach: _____

Part III - Residency Information

- I have not moved my residence out of the state of Florida since I last attended Miami Dade College.
 I have made a change in my permanent residence to an area outside of the state of Florida since I last attended Miami Dade College.
 (Must complete Florida Resident-For-Tuition-Purposes Affidavit)

Part IV - Citizenship Status Information

- I have not changed my citizenship or my status as a resident alien, refugee, asylee or visa student since I last attended Miami Dade College.
 I have changed my immigration status since I last attended Miami Dade College.
 I am now a: U.S. citizen Permanent resident Refugee Asylee/applicant Visa student
 Other - Please indicate _____

Part V - Certification

Have you ever been incarcerated or convicted of a felony, or have you experienced disciplinary problems at another educational institution?
 YES NO If yes, please submit a written statement detailing the circumstances to the dean of students for review prior to re-admission to Miami Dade College. This information will be handled confidentially.

NOTE: THE FLORIDA RESIDENCY AFFIDAVIT AND INFORMATION MAY BE REQUIRED.

I CERTIFY that all statements given in this application are true and accurate to the best of my knowledge. I agree to abide by the Students' Rights and Responsibilities Handbook and all other rules, regulations and policies of Miami Dade College. I agree that if my records are not complete within the initial term of enrollment or if any information is found to be false, I may be suspended from classes without a refund of any fees paid.

X _____
SIGNATURE OF APPLICANT _____ DATE _____

MIAMI DADE COLLEGE IS AN EQUAL ACCESS/EQUAL OPPORTUNITY INSTITUTION WHICH DOES NOT DISCRIMINATE ON THE BASIS OF RACE, GENDER, COLOR, DISABILITY, NATIONAL ORIGIN, MARITAL STATUS, RELIGION, AGE OR VETERANS STATUS. CONTACT THE OFFICE OF EMPLOYEE RELATIONS/EQUAL OPPORTUNITY PROGRAMS/ADA COORDINATOR AT 305-237-2051 FOR INFORMATION.