



## Application for Readmission

### Hiram College after Withdrawal

Office of the Registrar · PO Box 67, Hiram, OH 44234

Phone: 330.569.5210 · Fax: 330.569.5211

[Registrar@hiram.edu](mailto:Registrar@hiram.edu)

Hiram College reserves the right to deny readmission to any student for reasons including but not limited to outstanding financial obligations, academic deficiencies, college disciplinary actions, or convictions of criminal activity. Students will be informed by phone and by mail about the College's readmission decision. Students can appeal a denial of readmission through the Enrollment Management Committee. Appeals must be made in writing within three business days of received denial and submitted to Registrar, Hiram College Registrar's Office, PO Box 67, Hiram, OH 44234.

*Readmission to Hiram College does not guarantee readmission to the Nursing program. Please contact the Nursing Department for further information.*

In addition to completing this **Application for Readmission**, the following must be submitted to the Registrar's Office before consideration can be given to readmission. Once all documentation has been received, your Readmission file will be reviewed by the College, and you will be notified of the readmission decision. Please submit the following:

1. A **personal statement** which includes the following information:
  - a. Why did you leave Hiram? What has changed or will be different when returning to Hiram?
  - b. Please outline your plan for success at Hiram.
  - c. What you have been doing (working, attending school, etc.) since your withdrawal from Hiram?
  - d. If you were administratively asked to leave and/or involved with judicial action, what has changed to ensure your success upon return?
2. Contact information for two **personal references**.
3. If you have attended institution(s) elsewhere, please submit to the Registrar's Office:
  - a. **Official Transcript(s)**.
  - b. **Re-admission Waiver(s)**. (This form is available online at [www.hiram.edu/registrar](http://www.hiram.edu/registrar) )
4. For **Traditional College** readmission: A **readmission fee of \$100 and \$100 housing deposit** (if applicable) is required. Please make the payment online at [www.hiram.edu/deposit](http://www.hiram.edu/deposit), send to PO Box 1808 Hiram, OH 44234, or in person in the Office of Student Accounts. If readmission is denied the deposit(s) will be refunded.

**Applying for: Semester/Year:** \_\_\_\_\_ **Student ID (if known):** \_\_\_\_\_

**Name:** \_\_\_\_\_  
(First name) (Middle Name) (Last Name)

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip code)

**Mailing Address Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship:** \_\_\_\_\_ **Current Email:** \_\_\_\_\_

**Returning as (check one):**  Traditional Student  Center for Adult Studies Student

**Billing Address** (only if different from mailing address):

\_\_\_\_\_  
(Street) (City) (State) (Zip code)

**School(s) Attended Since Leaving Hiram:** \_\_\_\_\_

**Intended Major(s)** \_\_\_\_\_ **Minor** (If any) \_\_\_\_\_

**Advisor Choice:** \_\_\_\_\_ **Do you intend to apply for housing** (Traditional students only): Yes \_\_\_\_\_ No \_\_\_\_\_

**Employment since leaving Hiram (Names, Places, Dates):** \_\_\_\_\_

References: Please include name, title, and phone number for each reference.

#1 Reference \_\_\_\_\_ Phone \_\_\_\_\_

#2 Reference \_\_\_\_\_ Phone \_\_\_\_\_

I certify that to the best of my knowledge that the information given in this application is true, and that I may be requested to come to campus for an interview with College officials. I understand that any omission or misrepresentation of facts will be cause for denial of readmission or dismissal from Hiram College if later discovered. I understand that the references and previous academic institutions listed may be contacted. I further understand that it is my responsibility to arrange for all official transcripts to be forwarded directly from the issuing institution to be received by the Registrar's Office at Hiram College.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\***FOR OFFICE USE ONLY**\*\*\*\*\*

Readmission Application \_\_\_\_\_ Personal Statement \_\_\_\_\_ References \_\_\_\_\_  
Official Transcript \_\_\_\_\_ Readmission Waiver \_\_\_\_\_ Personal Interview \_\_\_\_\_  
Deposit(s) \_\_\_\_\_  
Email notification to below offices sent: \_\_\_\_\_

	Approved by:	Have Concerns:	Date:
Business Office:	_____	_____	_____
Rate Code:	_____	_____	_____
Dean of Students' Office:	_____	_____	_____
Student Financial Aid:	_____	_____	_____
Collections:	_____	_____	_____
Associate Dean of the College:	_____	_____	_____
Athletic Director (if applicable):	_____	_____	_____

Readmit letter sent \_\_\_\_\_ Banner updated \_\_\_\_\_ Campus notification: \_\_\_\_\_