



Graduate Request for Re-Entrance

How to use this form in an all-digital workflow

This form allows digital signatures and submission via email. To use the interactive features,

- Save this form to your device and open it in Acrobat Reader, rather than trying to complete it within your browser. Not all web browser PDF extensions enable interactive features.
- If the form requires signatures from more than one individual, please attach the form to an email to the first signer and ask them to sign and then forward it to the next signer.
- The last signer may send it back to you to submit, or they may use the “submit” button below.

The submit button generates an email to the staff member who processes your information, with your form attached. This workflow helps ensure that the Graduate School will receive just one completed form, signed by all.

Submit

Form instructions and form begin on following page



GRADUATE REQUEST FOR RE-ENTRANCE

The following information is important for former students wishing to re-enroll. Take time to read carefully. All sections of the application must be filled out completely. If a section is incomplete, the application will be returned to you. This will delay the processing of the application. **To ensure you can enroll in classes for the indicated returning semester, you must submit this form by the last day to register or add a class for that semester. You can find that date on each semester's [academic calendar](#).**

RE-ENTRANCE INFORMATION

Re-entry approval is required of graduate students who have either (1) not been enrolled in the previous academic term (fall or spring only; summers are excluded), or (2) withdrew from all coursework after beginning the academic term and want to return and register for the upcoming academic term. All re-entrance applicants' academic records will be reviewed for re-entrance eligibility in alignment with the leave of absence procedure.

This form is for students, both nondegree and degree-seeking, who have been enrolled in at least one academic term and have not yet graduated. This form cannot be used to change or be admitted to a new degree program or change student status from non-degree to degree-seeking. Nondegree-seeking students who were not enrolled within the past six years are considered new applicants and must submit a new application and all supporting materials to the [Office of Graduate Admissions](#), E-209 Martin Hall.

LEGAL PRESENCE

South Carolina state law requires all state institutions of higher education to verify legal presence in the U.S. All students will be asked to provide documentation to confirm their current legal presence. To ensure that a student may enroll and attend classes, they must provide documentation. Documentation must be uploaded electronically through the [Legal Presence Documentation Portal](#).

NAME CHANGE

Clemson University requires a student's full legal name to be included in their student records. If your name has changed since you last attended Clemson, you must provide your Social Security card with the new name. (A copy of a Social Security card is acceptable.) You must also complete the Name Change Procedure form. You may access name change information at <https://www.clemson.edu/registrar/student-menu/student-records/name-changes.html>.

ADVANCE REGISTRATION AND PAYMENT

Once students are accepted for the fall, spring, or summer term, they are encouraged to enroll in courses and pay fees well before the beginning of classes.

DEPARTMENT AND GRADUATE SCHOOL SIGNATURES

This form must be approved by the graduate program coordinator or the department chair and the Graduate School dean and recorded in the Office of Enrolled Student Services, 104D Sikes Hall, before you may enroll in graduate courses.



Graduate Request for Re-Entrance

☐ I am seeking *nondegree re-entrance*

☐ I am seeking *re-entrance to a degree program*

Program area of study: _____

XID#: _____

Name: _____ Date of birth: _____
Last First Middle Suffix

Home address: _____
Street/P.O. Box City State Zip code

Phone number: _____ CLEMSON Email: _____@clemsont.edu
Area code/number

Month/year last attended Clemson: _____ / _____

Name during last enrollment: _____
Last First Middle

I plan to re-enroll:

(Check semester box, then indicate the year; please refer to the [academic calendar](#) for start dates.)

☐ Fall ☐ Spring ☐ Summer Year _____

I certify that the information provided on this application is correct and complete.

Student signature: _____ Date: _____

☐ Department Chair **OR** ☐ Graduate Program Coordinator (check one)

Name (print): _____ Date: _____

Signature: _____

Graduate School Action: ☐ Re-entrance approved ☐ Re-entrance not approved

Comments:

Graduate School Dean signature Date: _____