



# Dordt College Readmission Form

Name \_\_\_\_\_ Colleague ID # \_\_\_\_\_

(Last) (First) (Middle Initial) (Maiden Name)

Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ E-Mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Social Security/Social Insurance # \_\_\_\_\_

Church Membership (Church) \_\_\_\_\_ (Pastor) \_\_\_\_\_

(Denomination) \_\_\_\_\_ (Pastor Address) \_\_\_\_\_

(Church Address) \_\_\_\_\_



When did you last attend Dordt? \_\_\_\_\_

Have you attended any college(s) since you last attended Dordt? If so, please list below ...

\_\_\_\_\_

Were you suspended from Dordt College for disciplinary and/or academic reasons? Yes  No

Anticipated date of attendance? Year \_\_\_\_\_ Semester  Fall  Part-time

Spring  Full-time

(Check One) (Check One)

Degree Types  Two Year  Four Year (Check One) (Refer to the catalog for assistance)

Major \_\_\_\_\_ Minor \_\_\_\_\_

**Education Majors Only:**  Elementary Education  Secondary Education (Check One)



**Please enclose the \$25.00 fee (U.S. funds)**

Return to: Associate Director of Admission  
Dordt College  
498 Fourth Avenue NE  
Sioux Center, IA 51250-1606

<b>OFFICE USE ONLY</b>
Approved by: Business Office _____
Student Services _____
Registrar _____