

RETURNING STUDENT APPLICATION

Office of the Registrar

Full Name (current): _____	Oxy ID #: _____
Former Name: <i>(if changed since last attended)</i> _____	
Permanent Email: _____	Telephone: _____
Permanent Address: _____	
<i>Street</i>	<i>City</i>
<i>State</i>	<i>Zip Code</i>
What semester did you last attend Oxy? _____	
Returning for: _____	
Major: _____	
Adviser: _____	
Expected Grad. Date: _____	

International students: If you are an international student returning to Occidental on a student visa, please confer with IPO (International Programs Office) **PRIOR** to returning to the College.

Contact information: (email) ipo@oxy.edu **(Phone)** (323) 259-2533

Please contact the Residence Life Office at (323) 259-2531 for on-campus housing information and availability. If you need to request housing accommodations due to a disability, please review the Housing Accommodation Policy and make your request at <https://www.oxy.edu/offices-services/disability-services/housing-accommodation-policy>.

EMAIL registrar@oxy.edu or FAX (323-341-4886) this form to the Office of the Registrar at least 30 days before you intend to return. You must provide responses to each of the following on attached pages:

- 1) Brief statement about why you left Occidental College.
- 2) Detailed statement about what you have been doing during your leave of absence.
- 3) Have you ever been convicted of a felony or any crime that requires registration under California Penal Code 290? Yes No
- 4) A specific list of all courses you have taken or are currently taking and the names of colleges attended since you left Oxy (include an official transcript of courses taken and documentation of grades in progress for current courses).
- 5) Detailed plan for resuming your future studies at Oxy (Course plan to address Core and major requirements, and a personal and academic plan to insure success at the college upon your return). We highly recommend that you consult with your academic adviser in developing these plan.

FOR COLLEGE USE ONLY

ID Number _____	Adviser _____	Box #: _____
Cum. Units Earned _____	Cum. GPA _____	
Approved by:		
Dean of Students _____	Dir. Grad. Studies _____	
Student Accounts _____	Res. Ed. _____	
Financial Aid _____	SPC _____	