

RE-ENTRY REQUEST FORM

Submit completed form to Progressions Assistant or nursing.inquiries@dal.ca

Student Name: _____ Dalhousie ID: B00 _____
 Last First Middle

I have been away from the program for _____ month(s)/semester(s).

Advanced Standing/Direct Entry _____ Last semester completed: _____

I am re-applying to enter the following semester:

Fall Winter Summer

I have successfully completed the following nursing courses:

Assistant Director, Undergraduate Studies (and Site Administrator Yarmouth site, if applicable) has been notified of intent to return? Yes _____ No _____ If not, please make notification as soon as possible.

Registrar's Office has been notified? Yes _____ No _____

Signed (student): _____ Date of Request: _____

Official use only:

Date Received _____ CLSC Notified: _____ Registrar's Office Notified: _____
 DD/MM/YY YES/NO YES/NO

Course Registration: _____ File Update: _____ Re-entry activities completed: _____

Official use only:		
Date Received _____	CLSC Notified: _____	Registrar's Office Notified: _____
DD/MM/YY	YES/NO	YES/NO
Course Registration: _____	File Update: _____	Re-entry activities completed: _____
		YES/NO

YES/NO