Office of the Dean for Graduate Education

Readmission Form

Directions
Submit this form if you wish to resume a degree program interrupted by absence of one or more terms (not counting the summer term). For work leading to another degree in the same department or to a degree in another department, contact department and submit a new application.

Step 1: Student
Submit completed form directly to your home department for review by email. If reapplying after an absence of one or more academic years submit on paper, and include a $75 application fee, payable by check or money order to MIT Graduate Admissions. This fee is not refundable.

Step 2: Department
Department will review, and send completed form by email to odge@mit.edu or on paper to Building 35-332 (if check is included). Department will communicate with student about registration procedures and requirements.

Step 3: ODGE
ODGE will enter approved application into the admissions database (Grade20) to initiate reactivation of student record.

1 Full Legal Name
   MR.
   MS.
   FAMILY NAME
   GIVEN NAMES IN FULL; UNDERLINE GIVEN NAME BY WHICH YOU PREFER TO BE IDENTIFIED.

2 Reply Address
   NO. STREET
   CITY
   STATE
   ZIP CODE
   TELEPHONE

3 Home Address
   NO. STREET
   CITY
   STATE
   ZIP CODE
   TELEPHONE

4 Date of Birth
   US Citizen? If not, what type of US visa do you hold?
   MONTH/ DAY/ YEAR

5 MIT ID Number:

6 This is an application for readmission to the department of
   ☐ February ☐ June ☐ September 20 __________

to specialize in the field of:
   SPECIFIC SUB-AREA IN THE DEPARTMENT
   for the degree of
   S.M., Ph.D., ETC

7 Date of original entry to the program
   Date of withdrawal:

8 Reasons for withdrawal:

9 Occupation since withdrawal:

10 Do you wish to be considered for financial aid? ☐ yes ☐ no A student answering affirmatively will be considered for each form of aid administered by MIT for which he may be eligible, including the award for Federal Traineeship. In some departments the student may have preference for one form of aid over another; if you have a preference, please indicate your order of choice here:
   ☐ Research Assistantship ☐ Teaching Assistantship ☐ MIT Fellowship or MIT Administered Federal Traineeship or Industrial Fellowship

Other fellowship(s)
   SUPPORT FROM AN INDUSTRIAL, MILITARY OR OTHER EMPLOYER
   GIVE NAME
   GIVE NAME

Signature
   Date

Approved ☐ Not Approved ☐ by
   Date

CHAIRMAN, DEPARTMENT COMMITTEE