







Failure to completely answer questions 1–6 on the previous page will delay the processing of your application. If you answer “yes” to any of the six questions above, you must provide an explanation of the circumstances on a separate sheet titled **Additional Information**.

PLEASE NOTE: You must promptly notify the Office of the Registrar *in writing* of any criminal charge, any disposition of a criminal charge, or any school, college or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you submit this application. Your failure to do so will be grounds to deny or withdraw your readmission, or to dismiss you after enrollment.

### FAMILY DATA

**Father (or guardian)** \_\_\_\_\_  
*last first middle*

Address \_\_\_\_\_  
*street / P.O. box city county state ZIP (9-digit)*

Home phone \_\_\_\_\_ / \_\_\_\_\_ Business phone \_\_\_\_\_ / \_\_\_\_\_

State of legal residence \_\_\_\_\_ Initial date of residence in North Carolina (month/year) \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Highest level of education (colleges and degrees earned) \_\_\_\_\_

**Mother (or guardian)** \_\_\_\_\_  
*last first middle*

Address \_\_\_\_\_  
*street / P.O. box city county state ZIP (9-digit)*

Home phone \_\_\_\_\_ / \_\_\_\_\_ Business phone \_\_\_\_\_ / \_\_\_\_\_

State of legal residence \_\_\_\_\_ Initial date of residence in North Carolina (month/year) \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Highest level of education (colleges and degrees earned) \_\_\_\_\_

**If you are married, spouse:** \_\_\_\_\_

\_\_\_\_\_ *last first middle*

Address (if different) \_\_\_\_\_  
*street / P.O. box city county state ZIP (9-digit)*

Home phone (if different) \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Highest level of education (colleges and degrees earned) \_\_\_\_\_

### APPLICANT'S AFFIRMATION

I certify the above to be correct and authorize the secondary schools and/or colleges I have attended to release transcripts, test scores, recommendations and other information required by the University of North Carolina at Asheville. I understand that all credentials submitted in support of this application become the property of the university and are not returnable. I agree to conform to the rules and regulations of the university. Any additions or changes in the information provided on this application must be submitted in writing to the Office of the Registrar prior to re-enrollment. I understand that my failure to provide complete, accurate and truthful information on this application will be grounds to deny or withdraw my readmission, or dismiss me after enrollment.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Application must be signed and dated** before we can render a readmission decision. An incomplete application will be returned to you for completion, thereby delaying action on your application.

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**For Office Use Only:** Date Received \_\_\_\_\_ Fee Paid \_\_\_\_\_ Date Entered \_\_\_\_\_

Res. Status Upon Readmission \_\_\_\_\_ IS \_\_\_\_\_ OS \_\_\_\_\_

Dec. \_\_\_\_\_ Reg. Off. \_\_\_\_\_ Date \_\_\_\_\_ Ltr. \_\_\_\_\_

Dec. \_\_\_\_\_ Reg. Off. \_\_\_\_\_ Date \_\_\_\_\_ Ltr. \_\_\_\_\_

Dec. \_\_\_\_\_ Reg. Off. \_\_\_\_\_ Date \_\_\_\_\_ Ltr. \_\_\_\_\_

### Notations: