

# Florida Southern College Re-Admitting Student Application

Name \_\_\_\_\_

Current Address \_\_\_\_\_  
State \_\_\_\_\_

City/ST/Zip \_\_\_\_\_

Contact Information  
Home (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Cell (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
E-mail \_\_\_\_\_ @ \_\_\_\_\_

SSN#: \_\_\_\_\_

Where are you currently attending school?  
\_\_\_\_\_ Residential School \_\_\_\_\_ Community College

Intended Major \_\_\_\_\_

I am applying for:  
\_\_\_\_\_ Fall Term \_\_\_\_\_ Spring Term

I will be attending:  
\_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time

Please list all colleges you attended since leaving FSC (if any) \_\_\_\_\_

- a. \_\_\_\_\_
- b. \_\_\_\_\_

Please bring a recent photograph of yourself to the interview.

1. What year did you leave FSC and what were the circumstances that led to your departure?
2. Why have you been doing since leaving FSC?
3. Why do you want to return to FSC?

Please send completed application to: \_\_\_\_\_ via email

Mail to:  
Attention: Transfer Re-Admitting Student Administration  
Florida Southern College Administration Office  
111 Lakewood Drive Lakeland, FL 33801-5698

Email: [fsad@fsc.edu](mailto:fsad@fsc.edu)

\*Incomplete applications will not be reviewed.\*