

# Application for Readmission to the Graduate School

**Office of Graduate Admissions**  
 Room 3-103 - 77 Massachusetts Avenue  
 Cambridge, Massachusetts 02139  
**Phone:** (617) 253-2917 **Fax:** (617) 253-4076  
**Email:** mitgrad@mit.edu  
<http://web.mit.edu/admissions/graduate>

**Directions:**

- A) Submit this form if you wish to resume a degree program interrupted by absence of one or more terms (not counting the summer term).
- B) Complete and return this form to the Graduate Admissions Office. Please type or print in ink.
- C) For work leading to another degree in the same department or to a degree in another department, file an Application for Admission to the Graduate Admissions Office.
- D) If you have nonresident status and wish your registration packet mailed, please check the box.
- E) If you are applying for readmission after a lapse of one academic year or more enclose an application fee of \$75. Use a check or money order payable to Office of Admissions, MIT. This fee is not refundable.

**1 Full Legal Name** MR.  
MS.

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FAMILY NAME GIVEN NAMES IN FULL; UNDERLINE GIVEN NAME BY WHICH YOU PREFER TO BE IDENTIFIED.

**2 Reply Address**

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NO. STREET CITY STATE ZIP CODE TELEPHONE

**3 Home Address**

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NO. STREET CITY STATE ZIP CODE TELEPHONE

**4 Date of Birth** **US Citizen?** **If not, what type of US visa do you hold?**

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MONTH/ DAY/ YEAR

**5 MIT ID Number:**

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**6 This is an application for readmission to the department of**  February  June  September **20** \_\_\_\_\_

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**to specialize in the field of:** **for the degree of**

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SPECIFIC SUB-AREA IN THE DEPARTMENT S.M., PH.D., ETC

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

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**8 Reasons for withdrawal:**

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**9 Occupation since withdrawal:**

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**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**

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GIVE NAME GIVE NAME

**Signature** **Date**

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