

Graduate students who have not been enrolled for more than one year must formally apply for Readmission. Graduate students previously admitted to a degree who will be returning to the same degree level and the same degree program may apply online for Readmission. A \$25 non-refundable fee is required. Student's who are Readmitting typically fall in to one of two categories. Please identify which category best fits your situation and follow the appropriate deadlines and instructions for re-admitting.

### Readmitting to take classes and continue with your degree

Degree completion will not be this semester

The student has an overall GPA of 3.0 or better and a 3.0 or better on the Plan of Study. (If there are grade issues a letter from the department needs to explain how those grade issues will be resolved by the end of the semester).

If the student has a previously approved Plan of Study: The department verifies that the Plan of Study has been re-examined by the student's Advisory Committee and continues to be acceptable. Or, if any of the following are needed, the forms are to be included with the Readmission application:

- Plan of Study Change
- Change of Committee
- Justification of Old Coursework if any courses on the Plan of Study are more than 5 years old.

If all required readmission materials are not submitted at the time of Readmission (EXAMPLES), a hold will be placed on future semester enrollment pending receipt and approval of those materials.

If the student does not have a Plan of Study but has completed 15 credits toward the masters or 24 credits for the doctorate, the department should supply a copy of a letter to the student indicating that the Plan of Study must be submitted to the Graduate School and approved within the semester of readmission. A Hold will be placed on future semester enrollment pending receipt and approval of the Plan of Study.

The application for readmission must be received as a complete packet. The checklist on the following page will assist you as you complete all the required paperwork for your readmission application.

### Defend/complete degree this semester

The student has an overall GPA of 3.0 or better and a 3.0 or better on the Plan of Study. All courses on the Plan of Study will be completed by the end of the semester; all grades on the Plan of Study are a C- or better. (If there are grade issues, a letter from the department needs to explain how those grade issues will be resolved by the end of the semester).

If the student has a previously approved Plan of Study: The department verifies that the Plan of Study has been reexamined by the student's Advisory Committee and continues to be acceptable. Or, if any of the following are needed, the forms are to be included with the Readmission application:

- Plan of Study Change
- Change of Committee
- Justification of Old Coursework if any courses on the Plan of Study are more than 5 years old.

If the student does not have a Plan of Study, a POS that would allow the student to complete the degree within the semester needs to be submitted electronically at the time of the Readmission application.

Note: Students readmitting in this framework must be enrolled in 3 credits.

The application for readmission must be received as a complete packet. The checklist on the following page will assist you as you complete all the required paperwork for your readmission application.

### Readmission Checklist

- Application for Readmission
  - Graduate In-state Tuition Request (if claiming entitlement to in-state tuition)
- International applicants who are or will be in F-1 or J-1 student visa statuses are required to show proof of adequate funding for at least one year before an I-20 or DS-2019 form can be issued. To do so, please complete:
- Immigration Information Form and the Affidavit
  - Plan of Study Review
    - Plan of Study Submitted (if taken 15 hours for Masters/24 hours for Doctorate)
    - Plan of Study Approved (if not, date submitted: \_\_\_\_\_)
    - All past coursework has been taken; all future coursework will be taken
    - Plan of Study Change Form (if changes to Plan of Study)
    - Change of Committee/Advisor Form (if changes to committee/advisor)
    - Courses older than 5 years have been justified
    - Course Justification Request Form (if course justification is needed)
    - Official Transcripts for transferred courses listed on the Plan of Study submitted
  - Completed packet for Readmission must be received within 1 week prior to the first day of classes. Otherwise, we will not be able to process the forms and you will only be given consideration for Readmission for the next available term of entry.

### Recommended Deadlines

Fall: August 1

Spring: January 1

Summer I: May 1

Summer II: June 1

Last day to submit the readmission application: Friday before the first day of classes

Questions? Call 540/231-8636 or  
e-mail [grads@vt.edu](mailto:grads@vt.edu) for assistance.

This form should be used for readmission after not being enrolled in either two or more semesters or when returning from a leave of absence. Applicants must reenter the same program and campus in which they were enrolled at time of departure.

As part of the readmission process, the student's Plan of Study must be up-to-date; in addition, a course justification should be submitted if any completed course work is older than five years. Acceptance is not guaranteed. Students seeking to pursue a different degree program or campus must print, complete, and submit the appropriate change form, found online at [www.graduateschool.vt.edu](http://www.graduateschool.vt.edu) (Academics/Forms).

The readmission application fee of \$25.00 will be charged to your Virginia Tech account and billed to you by the Office of the University Bursar. Please complete this form and any additional attached forms as needed and submit with your readmission application.

**Recommended Deadlines**

FALL	August 1
SPRING	January 1
SUMMER 1	May 1
SUMMER 2	June 1

Last day to submit the readmission application:  
 Friday before the first day of class

GENERAL

LAST/FAMILY NAME	FIRST/GIVEN	MIDDLE NAME	SUFFIX
List any former names: _____		Current Daytime Phone: _____	<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile
Social Security Number: _____		Current Evening Phone: _____	<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile
<small>Providing your SSN is optional, but is required of enrolled students for federal tax reporting. If you intend to apply for financial aid and scholarships or be employed on-campus, your SSN must be submitted.</small> Student ID Number: _____		E-mail Address: _____	
Current Mailing Address		Citizenship	
_____		<input type="checkbox"/> U.S. CITIZEN <input type="checkbox"/> PERMANENT RESIDENT <input type="checkbox"/> NON-U.S. CITIZEN, VISA STATUS: _____	
_____		Date of Birth: _____	
_____		month/day/year	
city	state	zip	country

Please specify your plans to resume your course of study.

Last Enrolled at Virginia Tech as a Graduate Student <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER I <input type="checkbox"/> SUMMER II _____ <small>year</small>	Term in which I Plan to Begin Classes <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER I <input type="checkbox"/> SUMMER II _____ <small>year</small>
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I have reviewed my Plan of Study with my academic department, and it includes the changes indicated by this application.  YES  NO

**Return your completed form(s) to:**  
 Graduate School  
 Graduate Life Center  
 at Donaldson Brown  
 Virginia Tech (0325)  
 Blacksburg, VA 24061  
 Fax: 540/231-2039

\_\_\_\_\_  
 APPLICANT SIGNATURE date

Questions? Call 540/231-8636 or  
 e-mail [grads@vt.edu](mailto:grads@vt.edu) for assistance.

**Additional Required Information**

Have you been convicted of or received a juvenile adjudication for a violation of any local, state, or federal law, other than a minor traffic violation?  YES  NO

Are you currently on court-ordered supervised or unsupervised probation or under the terms of a finding under advisement?  YES  NO

Please give a full explanation of any past criminal convictions:

ADDITIONAL REQUIRED INFORMATION

**Return your completed form to:**  
**Graduate School Admissions**  
Graduate Life Center at Donaldson Brown  
Virginia Tech (0325)  
Blacksburg, VA 24061  
Fax: 540/231-2039

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE



Obtain all required signatures and submit the original to the Graduate School.

PERSONAL INFO

LAST/FAMILY NAME	FIRST/GIVEN NAME	MIDDLE NAME	SUFFIX
<b>Student ID Number:</b> _____	<b>Citizenship</b>		
<b>Date of Birth:</b> _____ <small>month/day/year</small>	<input type="checkbox"/> U.S. CITIZEN <input type="checkbox"/> PERMANENT RESIDENT <input type="checkbox"/> NON-U.S. CITIZEN* <i>*If non-U.S. citizen, please list your visa status:</i> _____		
<b>E-mail Address:</b> _____ <small>@vt.edu account, preferred</small>	<b>Current Program</b>		<b>Degree Level</b>
<b>Daytime Phone:</b> _____	<input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER I <input type="checkbox"/> SUMMER II    _____ year		<input type="checkbox"/> DOCTORAL
<b>Local Address</b> <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile			<input type="checkbox"/> EDUCATION SPECIALIST
_____	<b>Anticipated Completion Term</b>		<input type="checkbox"/> MASTERS
_____	<input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER I <input type="checkbox"/> SUMMER II    _____ year		
_____	<b>Campus</b>		
_____	<input type="checkbox"/> BLACKSBURG <input type="checkbox"/> HAMPTON ROADS <input type="checkbox"/> NATIONAL CAPITAL REGION <input type="checkbox"/> RICHMOND <input type="checkbox"/> ROANOKE <input type="checkbox"/> SOUTHWEST VIRGINIA <input type="checkbox"/> VIRTUAL		
_____	city	state	zip    country

**Required Signatures**

Signatures of all dropped, added, and unchanged members are required. Please indicate the action to be taken for each committee member. Action Code: D = Drop, A = Add, U = Unchanged

ACTION CODE

COMMITTEE CHAIRPERSON signature	printed name	VT ID number	date
COMMITTEE CHAIRPERSON signature	printed name	VT ID number	date
COMMITTEE MEMBER signature	printed name	VT ID number	date
COMMITTEE MEMBER signature	printed name	VT ID number	date
COMMITTEE MEMBER signature	printed name	VT ID number	date
COMMITTEE MEMBER signature	printed name	VT ID number	date
COMMITTEE MEMBER signature	printed name	VT ID number	date

REQUIRED SIGNATURES

DEPARTMENT HEAD signature or authorized GRADUATE PROGRAM DIRECTOR	printed name	VT ID number	date
STUDENT signature			date
DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) signature			date
GRADUATE SCHOOL signature			date

 Return your completed form to:  
**Graduate School**  
 Graduate Life Center at  
 Donaldson Brown  
 Virginia Tech (0325)  
 Blacksburg, VA 24061  
 Fax: 540/231-2039

 Questions? Call 540/231-8636 or e-mail [grads@vt.edu](mailto:grads@vt.edu) for assistance.



The Plan of Study (POS) should consist of graduate coursework not older than 5 years at the time of approval. In some cases, graduate coursework older than 5 years can be justified and may be included on the POS. Justification for inclusion of such coursework should be assessed by the advisor with the support of the student's entire Advisory Committee. The Course Justification process represents an evaluation of the student's currency in the subject matter relevant to the pursuit of one's graduate degree.

STUDENT'S NAME \_\_\_\_\_

STUDENT'S DEGREE/MAJOR \_\_\_\_\_

LAST 4 DIGITS OF ID NUMBER \_\_\_\_\_

 REASON FOR SUBMISSION:  Readmission  Plan of Study Approval (initial)  Plan of Study Approval (additional degree)  Other: \_\_\_\_\_

COURSE NUMBERS	TITLES OF COURSES TO BE JUSTIFIED	YEAR COURSE WAS TAKEN

 Check here if additional courses are to be justified and list in Table 1 on the continuation page

Check all that apply and attach required documentation to this form:

RATIONALE	REQUIRED DOCUMENTATION
<input type="checkbox"/> Student is working in the field	CV OR RESUME WITH RELEVANT PROFESSIONAL EXPERIENCE HIGHLIGHTED
<input type="checkbox"/> Student received professional certification within past 5 years from a nationally recognized organization	CV/RESUME OR COPY OF EACH CERTIFICATE
<input type="checkbox"/> Related advanced courses on the Plan of Study require subject matter currency on the old course work	COMPLETE TABLE 2 ON CONTINUATION PAGE
<input type="checkbox"/> Student will be tested on written Preliminary Examination covering this subject matter	EXAM DATE:
<input type="checkbox"/> Other:	DETAILED EXPLANATION: rEA

By signing below, all faculty Committee members and Department Head or authorized faculty Graduate Program Director attest that the student noted above has remained current in the body of knowledge for all courses more than 5 years old that are included on the Plan of Study and that the student's full Committee has thoroughly assessed the student's currency in the subject matter via one or more of the Graduate School approved Justification strategies.

**Advisory Committee Signatures (Required of ALL Committee Members)**

Committee Chair signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
DEPARTMENT HEAD signature or authorized GRADUATE PROGRAM DIRECTOR	printed name	e-mail (@vt.edu, preferred)	date

GRADUATE SCHOOL DEAN signature \_\_\_\_\_

date \_\_\_\_\_

The Plan of Study (POS) should consist of graduate coursework not older than 5 years at the time of approval. In some cases, graduate coursework older than 5 years can be justified and may be included on the POS. Justification for inclusion of such coursework should be assessed by the advisor with the support of the student's entire Advisory Committee. The Course Justification process represents an evaluation of the student's currency in the subject matter relevant to the pursuit of one's graduate degree.

 \_\_\_\_\_  
 STUDENT'S NAME

 \_\_\_\_\_  
 STUDENT'S DEGREE/MAJOR

 \_\_\_\_\_  
 LAST 4 DIGITS OF ID NUMBER

Table 1: Additional courses to be justified

COURSE NUMBERS	TITLES OF COURSES TO BE JUSTIFIED	YEAR COURSE WAS TAKEN

Table 2: Comparison of old and current courses

OLD COURSE NUMBER AND CONTENT	ADVANCED-LEVEL COURSE NUMBER AND TITLE ON PLAN OF STUDY

STUDENT INFORMATION

SIGNA-

 Return your completed form to:  
**Graduate School**  
 232 Graduate Life Center  
 at Donaldson Brown  
 Virginia Tech (0325)  
 Blacksburg, VA 24061  
 Fax: 540/231-1670



If you are being charged out-of-state tuition and believe you are eligible for in-state rates, please complete the following form. You must be a U. S. citizen; a U. S. permanent resident; or hold a valid visa that permits the establishment of domicile to be eligible to qualify for in-state tuition. Please attach a copy of your permanent resident alien card or I-94, visa stamp, and/or other USCIS approval notification. You must also demonstrate intent to establish domicile in Virginia. This form must be submitted by the first day of classes in order to be considered for in-state tuition rates that term.

The university requires additional supporting documentation demonstrating your residency qualification for the prior year. **Please include a copy of each of the following documents: the first page of your state income taxes, your driver's license, your vehicle registration, your voter registration, and your current lease or mortgage agreement. Failure to supply this information may result in the denial of your request.** Use the other side of this form to provide additional information to be considered on your application.

PERSONAL INFO

LAST/FAMILY NAME	FIRST/GIVEN	MIDDLE NAME	SUFFIX
Last 4 of VT ID Number: _____ if known			
Date of Birth: _____ month/day/year			
E-mail Address: _____ @vt.edu account, preferred			
Daytime Phone: _____			
Local Address _____ <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile			
_____			
_____			
_____			
city state zip country			

How long have you resided in Virginia? Years: \_\_\_\_\_ Months: \_\_\_\_\_

Beginning with the most recent, chronologically list the addresses at which you have resided for the past two years.

Prior Address 1: _____	street address	city	state	zip	country
Prior Address 2: _____	street address	city	state	zip	country

REQUIRED

Do your parents/legal guardian/spouse provide over half of your financial support OR claim you as a dependent on their taxes?  YES  NO

If yes, in which state do your parents reside? \_\_\_\_\_  
 (Attach a copy of the first page of their state income taxes and the page of the federal tax returns listing you as a dependent.)

For the twelve months prior to the term in which you are requesting in-state tuition rates, will you have:

1. Filed a tax return or paid income taxes to Virginia? Attach a copy of the first page of your state income taxes	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Been a registered voter in Virginia? Date of issue on voter card: _____ State of issue: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Held a valid Virginia Driver's license? Date of issue on driver's license: _____ State of issue: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Owned or operated a registered vehicle? Date of issue on registration card: _____ State of issue: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Are you, the spouse of, or the dependent of active-duty military personnel?	<input type="checkbox"/> YES <input type="checkbox"/> NO
a. Are you/they permanently stationed in Virginia? (If yes, include a copy of your/their orders)	<input type="checkbox"/> YES <input type="checkbox"/> NO
b. Do you have a current lease/mortgage agreement in Virginia? (If yes, include a copy)	<input type="checkbox"/> YES <input type="checkbox"/> NO

SIGNATURE

I hereby certify that all of the information provided on this form is true and accurate. I understand that my request for in-state tuition is a legally binding document and that if I provide fraudulent information, I may be subject to repayment of tuition and/or dismissal from the university. I agree to furnish the university with supporting documentation, if asked, related to my request in a timely manner. I realize that failure to supply additional information may result in a denial of my request.

\_\_\_\_\_  
 APPLICANT SIGNATURE date

**Return your completed form to:**  
 Graduate School  
 Graduate Life Center at Donaldson Brown  
 Virginia Tech (0325) • Blacksburg, VA 24061  
 Fax: 540/231-2039

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