

## Required Documents

- There is a readmission fee of \$150 for students who have been away from UCW for over 1 year
- Please submit a current resumé along with a detailed Letter of Intent describing why you should be readmitted and outlining your professional and educational activities since you last studied at UCW
- Please send official transcript of any course work completed since last attending to the UCW Registrar's Office
- To be readmitted you must not have any outstanding debts to UCW
- To pay the \$150 readmission fee or check your financial balance log into myUCWest or contact Financial Services at [ucwfinance@ucanwest.ca](mailto:ucwfinance@ucanwest.ca)
- The Readmission Application **deadline is 2 weeks before the start of the term** in which you would like to register
- Updates on your readmission application will be sent to your myUCWest account.

## Student Information

UCW Student Number: \_\_\_\_\_ Date of Birth (YYYY/MM/DD): \_\_\_\_\_

Last/Family Name: \_\_\_\_\_ Former Last/Family Name: \_\_\_\_\_

First name: \_\_\_\_\_ Middle/Other Names: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

\*Your mailing address will be updated in myUCWest. You must notify the Registrar's Office of any address change.

Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell/Mobile: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

## Program Information

Return term:  Winter (Jan) \_\_\_\_\_  Spring (Apr) \_\_\_\_\_  Summer (July) \_\_\_\_\_  Fall (Oct) \_\_\_\_\_

Your Program of Study:  Associate of Arts  Bachelor of Arts  Bachelor of Commerce  MBA

Last term you attended UCW? (YYYY/MM) \_\_\_\_\_

Why did you discontinue your studies? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you wish to restart your studies at UCW? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Declaration: I hereby declare that:**

- The information I have submitted in this application for readmission is true, correct, and complete to the best of my knowledge
- I understand that submission of any false statements or documents will result in the immediate cancellation of my readmission and registration
- I understand that completion of this signed application permits University Canada West to request and/or confirm any information necessary to support my application for readmission
- I understand and acknowledge that it is my responsibility to be aware of, and comply with, all University Canada West policies and procedures.

**Privacy & Data Protection**

The University will review the information provided in this form to determine your eligibility for enrollment with the University, to manage your application and the readmission process and, if you elect to attend, to manage enrollment and attendance at the University, including but not limited to registration, maintenance of your student record, and the provision of services to students. The personal and educational information you provide on this form may be shared with departments of the provincial and federal governments as required by legislation and regulation. Additionally, your information may be reviewed by the University's parent company, Global University Systems based in the United Kingdom and the Netherlands and your personal and contact information may be provided to third parties based in the United States or other jurisdictions for the provision of services to students (eg. library databases). Accordingly, please be aware that your personal and educational information will be accessed and stored outside of Canada. The University collects, uses, and discloses your personal information as permitted or required by applicable privacy legislation. If you have any questions, please consult our Privacy Policy <https://ucanwest.ca/media/105004/6751-informationprivacysecurity.pdf> or contact our Privacy Officer at 604.915.9607. By submitting this application and signing below, you expressly consent to the collection, use, and disclosure of your personal and educational information as described herein and are hereby notified that your personal information may be accessed and stored outside of Canada.

\_\_\_\_\_  
**Signature of Student**

\_\_\_\_\_  
**Date**

**Office Use Only**

Payment Received?  Yes  No  Not Required

Readmission Reviewed by Admissions Committee:  Yes  Not Required

Decision: \_\_\_\_\_ Date: \_\_\_\_\_

Rationale: \_\_\_\_\_

Signatures: \_\_\_\_\_