## Application for Reactivation

(For Kinesiology Students away one or more years)

Kinesiology students who are out of registration for more than one year must complete this form and have an appointment with the Kinesiology Director of the Office of Student Affairs (in person or by phone). The student may schedule the appointment at the reception desk in 555 S. Forest Avenue or by calling (734)764.4472. The Director provides the student with academic advising, directions about registration and e-mail activation.

Printed Name:			UMID #:
If your name has changed since you v	were last enrolled, what was	s your former name	?
Current Address:			
E-mail address:		(City/State/Zip	)) 
Phone Number: ( )	Г	Date of Birth:	
Are you a United States Citizen or Peri	manent Resident?	Yes	No
If no, are you here on an F-1 or J-1	Yes*	No	
*If yes, <b>after</b> being approved for reactivation and provide them with supporting financial all the required materials, you <b>must</b> make appointment can be in person or by phone required information you must provide.	al documentation and a cop an appointment with an Int	y of your reactivati ternational Student	on e-mail notification. When you obta Advisor by calling 734.764.9310. Thi
When were you last enrolled at UM?			
Year: Term: H	Fall Winter _	Spring	Summer
What term and year are you planning to	o return?		
Year: Term: H	Fall Winter _	Spring	Summer
Did you leave in good standing (i.e. no If no, you <b>also</b> need to petition the Acader	•		es No
What program do you hope to pursue u	ipon your return?		
When are you planning to graduate?	Term	Year	
List all institutions of higher learning t	hat you have attended	since you were	last at UM.
Institution	Location		Dates Attended (from/to)
List all employers since you were last a	 at UM:		

Is your father a Michigan Resident?	Yes _	No	_		
Is your mother a Michigan Resident?	Yes _	No	_		
Are you a Michigan Resident?	Yes	, since	No		
If you answered "yes" and any of the	following	circumstances apply, y	ou must file an Application for Resident		
Classification and be approved to qualify for in-state tuition:					
<ul> <li>You currently live outside the state of Michigan for any purpose, including, but not limited to, education, volunteer activities, military service, travel, employment.</li> <li>You have attended or graduated from a college outside the state of Michigan.</li> <li>You have been employed or domiciled outside of the state of Michigan within the last 3 years.</li> <li>You are not a U.S. citizen or Permanent Resident Alien (if you're a Permanent Resident Alien, you must have a Permanent Resident Alien card).</li> </ul>					
• Your spouse, partner, or parent is in Michigan as a nonresident student, medical resident, fellow, or for military assignment or other temporary employment.					
• You are 24 years of age or younger and a parent lives outside the state of Michigan.					
• You are 24 years of age or younger and have attended or graduated from a high school outside the state of Michigan.					
• You have attended or graduated from an out-of-state high school and have been involved in educational pursuits for the majority of time since high school graduation.					
• You previously attended any U-M campus (Ann Arbor, Dearborn, or Flint) as a nonresident.					
Other circumstances may also require you to file a residency application.					
Other circumstances may also require you to file a residency application. The University's Residency Classification Guidelines and Application for Resident Classification can be found on the web at http://ro.umich.edu/resreg.php. If you have questions or need assistance, contact the Residency Classification Office at (734)764-1400.					
The deadline dates for submitting an Application for Resident Classification apply to the term for which residency is sought and are as follows: September 30 for Fall Term, January 31 for Winter Term, July 31 for Spring, Spring/Summer, and Summer Terms. Applications must be received in the Residency Classification Office by 5 p.m. on the deadline date. Applicants who do not file by the deadline will be responsible for paying nonresident tuition.					
By my signature, I certify that all answers I have given on this application are complete and accurate to the best of my knowledge. I understand that the College may revoke my reactivation if I falsify or omit information this form requests.					
Student's Signature:			Date:		
For Board Member					
1 of Board Memoer		Reactiva	ted On M-Pathways?		
Interviewer:		Yes _	No		
Date:			give reason		
Expected Graduation Term:(For F-1 & J-1 Students Only)					
Provided Information Sheet? Yes	No				
Advisor Assigned?  Date:					
Yes, list advisor if not yourself		G:			
		Signature	2:		
No Advisor Assigned			Excel Statsend copy of form to Residency Office		

For Administrative Staff