

Declaration of Academic Bankruptcy

Name:		Student ID or Date of Birth:		
Phone:		E-mail:		
	U of A-Fayetteville Last Enrollment Information	Last Term:	Last Year :	
	 Declaration of Academic Bankruptcy Qualifications You must have previously been enrolled at the University of Arkansas-Fayetteville, as an undergraduate student and be returning as an undergraduate student. You must not have been enrolled at the University during the previous 5 years. If you have attended another institution since your last attendance at the University, you must meet all requirements for admission of transfer students (2.0 on all course work attempted more than the five years after your last enrollment at the University of Arkansas-Fayetteville) to be eligible for readmission to the University. You must submit an application for readmission and official transcripts of all college work attempted since your last attendance at the University of Arkansas by application deadline. You must sign and submit this completed form to The Office of the Registrar upon applying for readmission. 			
It i	is strongly recommended that you discuss Ac			
P_{i}	Please read the following carefully. Indicate your unders condition. If you have any questions or reservations co Office of the Registrar befo	standing of each co oncerning any of th	ndition by checking the box next to each he statements, please consult with the	
	I am forfeiting all credit hours previously awarded at the Univers grades earned), any transfer credit hours previously awarded, and			
	My academic record will reflect a complete record (including all Bankruptcy Declared. However, a new GPA and credit hours wil No courses completed prior to this declaration will be counted in	ll be computed from th	e time that the academic bankruptcy is declared.	
	Courses taken at another institution within five years of my last e accepted in transfer.	enrollment at the Unive	ersity of Arkansas-Fayetteville, will not be	
	I understand that this Declaration of Academic Bankruptcy is fine	al and irreversible.		
	By signing here I understand and agree to a	all of the conditions	of Academic Bankruptcy.	
Sig	gnature:		Date:	

If you meet the requirements, your Declaration of Academic Bankruptcy will be approved.

b)Your transcript will reflect your complete record (including all previous college work) with an added notation of "Academic Bankruptcy". c) In order for the University to provide appropriate advising and (as required by Arkansas Act 1052) appropriate assessment, you will be required to submit ACT scores prior to registration for classes if, as a result of academic bankruptcy, you are returning to the University as a freshman with fewer than 24 transfer hours.

Submit Completed form to: Scan and e-mail to: registra@uark.edu

Fax to: (479) 575-4651

Mail to: Office of the Registrar 141 Uptown East Fayetteville, AR 72701

a) A new calculation of grade point average will begin when you return to the University.