



Georgetown University
Graduate School of Arts & Sciences

Complete and return to:
Ms. Karin Cerniglia - Application Reactivation
Box 571004-R, Georgetown University, Washington, DC 20057-1004

APPLICATION REACTIVATION REQUEST FORM

Please note that you may reactivate an application only if the application was submitted within the last year and for the same program. Reactivation requests and all required documentation must be received by the program application deadline for the appropriate admission term.

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_

Department or Program to which you are requesting reactivation: \_\_\_\_\_

Please indicate the term to which you wish to reactivate your application:

Spring 2008 [ ] Summer 2008 [ ] Fall 2008 [ ] Spring 2009 [ ] Summer 2009 [ ] Fall 2009 [ ]

Mailing Address and Contact Information:

Address line 1 \_\_\_\_\_

Address line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Address Valid Until: (month/day/year) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Current Phone Number: \_\_\_\_\_

In addition to this form, please submit the following:

- 1) One updated letter of recommendation
2) An updated statement of purpose
3) A nonrefundable application reactivation fee of \$75 (The fee may be paid by check or money order made payable to Georgetown University. Please write your name, Social Security Number - if applicable, program, and requested term of admission on your check or money order). Please note that the fee is \$125 for the Special Masters in Physiology program.

Signature

Date

Please return this form (and required documents) to the address shown at the top of this form.