



Office of Recruitment and Admissions
Central Connecticut State University
1615 Stanley Street, P.O. Box 4010
New Britain, Connecticut 06050-4010

Name _____ Banner ID _____
Address _____ Phone # _____
City _____ State _____ Zip _____

Guidelines

- A. At least two academic years shall have intervened between exit from Central and re-entry at Central.
Last Semester Enrolled at CCSU: _____ Requested Re-entry Date: _____
- B. A formerly matriculated undergraduate student shall have attempted no more than 60 credits at CCSU.
Number of semester hours attempted at CCSU: _____
- C. A non-matriculated undergraduate student shall have attempted no more than 30 credits at CCSU.
Number of semester hours attempted at CCSU: _____

Policy

To the student: Please read the following completely before signing

1. I understand that records will be treated as that of any transfer student. (This means that if you have Earned grades below a "C-" at CCSU before being granted Fresh Start, grades will not count toward your graduation requirements.)
2. During the first semester back on campus, I will be restricted to 16 semester hours or less.
3. My graduation requirements shall be those in the catalog in force at the time of my re-entry not my original matriculation date.
4. I will not be able to use the Fresh Start option again.

I have read and understand all of the above policies with regard to my application to the Fresh Start Program, and I agree to comply with them if granted "Fresh Start."

Signature: _____ Date: _____

Recommendation of Fresh Start Counselor:

Signature: _____ Reactivation form or application for admission submitted

For Office Use Only

Approved Not Approved

Date: _____

Associate Vice President for Academic Affairs