



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

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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

 Associate Vice President for Academic Affairs

Date: _____