



# Application For Admission FORMER APPLICANT

P.O. Box 7001  
Longview, Texas 75607

903-233-4300 800-759-8811  
FAX 903-233-4301

admissions@letu.edu  
www.letu.edu

## Personal Information

Mr. \_\_\_\_\_  
 Mrs. \_\_\_\_\_  
 Ms. \_\_\_\_\_

First Name \_\_\_\_\_ Middle/Maiden Name \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Temporary Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Use temporary address until: \_\_\_\_\_ Temporary Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## Educational Information

Semester you originally applied for:      Fall 20\_\_\_\_      Spring 20\_\_\_\_      Summer 20\_\_\_\_

Semester you are currently applying for:      Fall 20\_\_\_\_      Spring 20\_\_\_\_      Summer 20\_\_\_\_

Housing:    Residence Hall       Married Student Housing       Off-campus (see Student Handbook for eligibility)

Intended Major: \_\_\_\_\_

If you have attended any other colleges or universities since applying to LeTourneau, list them below with dates of attendance and request that an official transcript be sent from each: \_\_\_\_\_

\_\_\_\_\_

If you have not attended any other colleges or universities since applying to LeTourneau, how have you been occupied since the time of your original application? \_\_\_\_\_

## Personal Statement

Please provide us with your reason(s) for wanting to return to LeTourneau University to complete your degree. (Use additional paper if necessary.) \_\_\_\_\_

Describe briefly your current relationship to Jesus Christ: \_\_\_\_\_

\_\_\_\_\_

Your church or denominational preference: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

LeTourneau University admits students regardless of race, color, sex, and national or ethnic origin.