

## **Returning Student Clearance Form**

Student's Name:Student's Email Address:	Student's ID number: Student's Phone Number:
This section is to be completed by the Registrar's O	office:
Student's last semester of attendance:	
Student's cumulative G.P.A	
Student's Academic Standing: Good Good	Probation Dismissal
Signature of Registrar or designee	 Date
This section is to be completed by the Business Off	ice:
Student has an outstanding balance: Yes	[ ] <sub>No</sub>
Balance to be satisfied:	
Signature of Student Account Office or designee	Date
This section is to be completed by Student Affairs:	
Student is in good disciplinary standing with the Un	niversity: Yes No
Student is current on all immunization records:	Yes No
Signature of Dean of Student Affairs or designee	Date
This section is to be completed by the Student:	
all official academic transcripts from each college/u University. Additionally, I understand that prior to d	ve is true. I understand that as a returning student I must submit university attended since my last enrollment at Huston-Tillotson completing registration, I must pay any outstanding balances from resity or enter into a payment plan with the University.
Signature of the Student	 Date