

## ACADEMIC FRESH START ACKNOWLEDGEMENT

Directions: Please complete, and submit to the Office of Admissions prior to an admission decision being rendered.

Name:	Student ID#:	
Other Names:	Entry Semester:	Fall 20
Address:		Spring
City/State/Zip:		Summer
ist all the previously attend colleges/universities with creditated an additional sheet with required information.	t 10 years or older. If additional lines are	needed, please
Full name of community college/university	Attendance dates	# of hours enrolled
		-
Please read and initial each statement below.		
I understand credits earned 10 years prior to my an considered as transferrable credit at UNT Dallas.	nticipated semester of enrollment indicat	ed above will not be
I understand credits 10 years or less will be conside	red for transferrable credit at UNT Dallas	
I understand credits earned 10 years or older may so benefits eligibility.	till be considered and calculated for financ	cial aid and veteran's
I understand credits earned 10 years or older may which includes withdrawals (W) and repeated cours	•	e to excessive hours,
I understand this form must be submitted prior to decision is rendered I cannot opt in or out of the Ac		Once an admission
I understand if I have earned a Bachelor's degree   the Academic Fresh Start program.	prior to attending UNT Dallas, I am inelig	ible to participate in
I understand falsification of information will result in of any application fee paid.	n the administrative withdraw of my appli	cation and forfeiture
Signature		