

Application for Re-Admission

INSTRUCTIONS:

Use this form if you have previously attended COSTAATT and wish either to (i) resume studies in the same programme, or (ii) commence a new programme.

Please submit identification documents again in order for your student record to be verified and/ or updated.

APPLICANT INFORMATION:

| Surname | First Name | Previous Surname | Title |
|---------|------------|------------------|-------|
|---------|------------|------------------|-------|

Address:

Date of Birth: _____ Student No.: _____ ID/PP No.: _____

Tel: Home: _____ Mobile: _____ Work: _____ Email: _____

PROGRAMME INFORMATION:

PROGRAMME LEVEL: _____ CAMPUS: _____

PROGRAMME NAME: _____ MODE: _____

DESIRED START DATE: _____ YEAR: _____

Citizenship: _____

Trinidad and Tobago Citizens:

Have you been residing in Trinidad and Tobago for the past three (3) Years? **Yes:** _____ **No:** _____

If No, length of time in Trinidad & Tobago: **Years:** _____ **Months:** _____

Did you earn a Degree/Diploma/Certificate from COSTAATT? **Yes:** _____ **No:** _____

Previous dates of attendance at COSTAATT: **From:** _____ **To:** _____

Previous COSTAATT Programme: _____

Please list any institution (s) you have attended since leaving COSTAATT:

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FUNDING:

I intend to fund my studies via:

Self: **Government Assistance for Tuition Expenses (GATE):** **Other, please state:**

I already have an e-GATE ID:

e-GATE ID #

DISABILITY DISCLOSURE:

Do you have a disability, chronic/long term medical condition or special need(s)? **Yes:** **No:**

If you select 'Yes', please note you will be re-directed to complete a Disability Disclosure form. Kindly download this form and fill in the necessary information. This will assist in assessing your requirements for educational provision. Acrobat Reader or a similar program must be utilised to complete it. Please note that users can save the form at any point and return to complete it at a later time. After you have finished please select the 'Submit' button on the form.

NB: If you are not able to access the Disability Disclosure Form, please contact the Admissions Office at admissions@costaatt.edu.tt.

EMERGENCY CONTACT:

Name: _____ **Relationship:** _____ **Phone No.:** _____

Address: _____

TERMS, CONDITIONS AND DECLARATION

The following revised terms, conditions, declaration and policies pertinent to applicants seeking re-admission to COSTAATT supersede all prior published versions. As part of the process to submit a re-admission application to COSTAATT, you are required to read and agree to the terms and conditions, as well as applicable policies, and make a declaration. Please read carefully before indicating your agreement.

Submission, Disclosure and Corroboration of Applicant Information

1. I understand that any information submitted on my application for readmission is subject to verification by the College. Therefore, to corroborate information supplied, the College may obtain official records from an examination body, educational institution, my employer, or other persons or organisations.
2. I authorise any institution or organisation named on documentary evidence submitted in support of my application for readmission, to release to the College, any personal information needed to verify my supporting documents (if necessary) including, but not limited to, academic qualifications, work experience, or personal references.

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3. I authorise the College to release any personal information they may hold about me to another educational institution, to verify my academic record, student conduct or determine my eligibility for admission to or enrolment in that institution.
4. I agree to the release of any or all information regarding my academic performance, conduct and enrolment details to officers of the law who require the information as part of any legitimate/sanctioned investigation, as well as to a sponsoring individual or organisation that has been nominated by me as responsible for payment of either my college or tuition fees.
5. I agree to disclose, at the time of application, any pertinent disability and /or medical information that may impact my learning, so that consideration can be given, to the degree possible, for reasonable accommodations to better support me at the College.
6. I agree, in accordance with standard admissions verification procedures, to present to college authorities upon request, originals of all documents submitted in support of this application.
7. If I am under 18 years of age, I consent to the release of information regarding my academic performance, conduct and attendance to my parents and / or named guardian.
8. I agree to advise the College of my residential, postal and email addresses, as well as mobile telephone number(s) on my application for readmission, and to notify of any changes to same, in a timely fashion.

Please check that you have read, understood and accept the above.

Offers of Admission

9. I understand that the College may offer me an alternative course or programme of study if I do not meet stipulated entry requirements for the programme to which I apply.
10. I understand and accept that the College has the right to reject my application, alter or withdraw an offer of admission, cancel my enrolment or take disciplinary action on the basis of incomplete, false or misleading information submitted on / in respect of my application for readmission, at any point after the discovery has been made.

Please check that you have read, understood and accept the above.

Applicants: Holders of CARICOM / International Student Visas

11. As an applicant for or holder of a student visa, I understand and agree to abide by all the requirements of such visa.
12. If I am the holder of another type of visa, I understand that it is my responsibility to ensure that such visa permits me to undertake the course or programme of study in which I enrol at the College.
13. I understand that I must enrol for a full-time course load at the College.

Please check that you have read, understood and accept the above.

Financial Obligations for CARICOM Nationals and Students with International Student Visas

14. I understand that as a CARICOM or international student, I will be responsible for the payment of all college and tuition fees at applicable rates for the duration of the course or programme of study undertaken at the College.
15. I agree to provide the College with full information on my immigration and / or residency status at the time of readmission, and to immediately notify college authorities of any changes to same.

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16. I agree to provide any financial information requested by the College for the purpose of assessing my financial ability to undertake a course or programme of study and to support myself for the duration of the course or programme of study undertaken at the College.

Please check that you have read, understood and accept the above.

Enrolled Students: Personal, Academic and Study Obligations

17. I declare that I am not now subject to disciplinary action or exclusion from another tertiary institution.
18. I agree to conduct myself with honesty and integrity in the pursuit of my studies.
19. I agree to demonstrate respect for others and the diversity of views within the campus community.
20. I will not bring the College into disrepute and will strive to be a good campus citizen.
21. I will abide by the College's Student Code of Conduct and all other relevant rules, regulations, policies and procedures of the College.
22. I understand that I must always strive to achieve academic excellence and should access tutorial support as and when needed and should consistently work with my academic advisor in support of my academic success.
23. I understand that in keeping with the College's academic regulations, I may be dismissed from the College for consistently poor academic performance.
24. I accept that the College relies on technology tools and applications to deliver its programmes and services to students and that I must prepare myself to use these resources to engage with others within my campus environment.
25. I accept that the College's student email system is my primary official communication channel with the College and all relevant notices will be sent to me via this system. As such, any failure on my part to keep this channel of communication active will not constitute a valid excuse for missing pertinent college deadlines and general information.
26. I agree to advise the College of changes to my contact details including: residential and postal addresses, email addresses, mobile telephone number(s), as well as any amendments to my name, next of kin or beneficiary details, in a timely manner.
27. In order to assist in the accurate assessment of tuition fees, I agree to immediately provide the College with all necessary information and / or documentation to support any change to my immigration and / or residency status.

Please check that you have read, understood and accept the above.

Enrolled Students: Financial Obligations

28. I understand that the College has the right, with or without advance notice, to periodically revise college and tuition fees, as necessary.
29. If I am a national of Trinidad and Tobago who is seeking tuition support for a GATE (Government Assistance for Tertiary Education) approved programme, I will apply for such at the beginning of each and every semester in which I intend to enrol.

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30. If I am a national of Trinidad and Tobago who is seeking tuition support, I accept that it is my responsibility to follow up on the status of my GATE application(s) with the Funding and Grants Division of the Ministry of Education, to ensure that there are no administrative delays due to any oversight on my part.
31. I agree to promptly settle all non-GATE fees owed to the College.
32. I agree that any denial or delay in approval of GATE, or other funding, by a sponsoring entity, including government, will require me to immediately settle all college and / or tuition fees owed.
33. I understand that calculations of my indebtedness to the College are subject, at any time, to review and verification procedures to determine accuracy and completeness. Should such review lead to increased levels of indebtedness on my part, I accept that outstanding college and / or tuition fees must be satisfactorily settled within the timeframes prescribed by the College.
34. I accept that the College operates a technology-based system for course registration and that it is my responsibility to comply with the guidelines and deadlines issued for the registration process, and that failure on my part to comply with these guidelines and deadlines will attract the relevant fee penalties.
35. I understand that course registration (electronic or otherwise) is subject to deadlines prescribed by college authorities and that any failure on my part to follow guidance and/ or comply with such deadlines will attract relevant fee penalties.

Please check that you have read, understood and accept the above.

COSTAATT DATA PROTECTION POLICY

Applicants authorise the College to use or process information provided on / in support of re-admission in the following ways:

- To allow the College to process your application for re-entry;
- To allow the College, a government body, a research institution or accrediting organisation to compile statistics, images, audit or evaluate programmes or plan future educational provision;
- To allow the College to establish your student record in electronic file formats;
- To assist the College in processing an application for financial assistance.

Please check that you have read, understood and accept the above.

DISCLOSURE OF INFORMATION

The College undertakes not to disclose the information provided by applicants/students to any individual or agency unless it is in alignment with clauses set out in the Terms and Conditions, Applicant Declaration, Data Protection Policy and / or the following:

- The student has disclosed information which the College is asked to confirm;
- The student is between 16 and 18 years of age and is claimed by their parents as a dependant for tax purposes;
- The student is in an emergency situation and it is necessary to protect his/her health or the health and safety of others;

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- The student is suspected of fraud against the College;
- The student's information is requested under the laws of Trinidad and Tobago by legitimate legal authority and means.

Please check that you have read, understood and accept the above.

APPLICANT DECLARATION

In order for your application for re-admission to be considered by the College, you must read and agree to the declaration outlined below:

- I certify that all information submitted in this application is accurate, complete and true to the best of my knowledge and that no information that would have a bearing on my re-admission or enrolment has been withheld.
- I understand that giving false or misleading information may result in rejection of this application or termination of my registration with the College.
- I agree to inform the College immediately if there is any change to the information provided in this readmission application.
- I agree to abide by the rules, regulations, policies and procedures of COSTAATT.
- I agree to present originals of all academic and supporting documents submitted in support of this application, as and when required by college authorities, for the purpose of verification.
- I have read, understood and accept the above terms and conditions, the COSTAATT Data Protection and Disclosure of Information policies.
- I consent to the use of my personal information as set out in the Terms and Conditions, Data Protection, and Disclosure of Information policies.

Please check that you have read, understood and accept the above.

Date: _____

FOR OFFICIAL USE ONLY

Academic Profile Reviewed by Chair. Decision: _____

Comments:

Academic Chair's Signature: _____ **Date** _____

Registry Clearance Granted: Yes: No: