



**ACADEMIC FRESH START ACKNOWLEDGMENT
TEXAS A&M UNIVERSITY
OFFICE OF ADMISSIONS**

Last Name First Name M.I. UIN

Street Address

City State Zip Code Semester Applied

I understand and accept the provisions of the Academic Fresh Start Policy. I acknowledge that I will not receive any credit for coursework 10 or more years older and I certify that I have provided a complete record of my academic history.

Signature

Date

Return the signed acknowledgment by the appropriate deadline:

Upload through the Applicant Information System
applicant.tamu.edu

or

**Mail to Admissions Processing
Texas A&M University
Office of Admissions
P O Box 40003
College Station, TX 77842-4003**