Hobart and William Smith Colleges Geneva, New York 14456

NON-MATRICULATED STUDENT APPLICATION FORM

Instructions: Complete this form and submit it to the respective Dean of the College, Smith Hall.

BIOGRAPHICAL INFORMATION					
Name_ (For Graduate Attendee Program) If attended	Habart and William Smith Cal	Student Identification N	lumber:		
,					
please indicate name here:		Year of Graduation:	Year of Graduation:		
(check one) Male Female					
Mailing address					
Home address (if different from above)					
Birth date	Home telep	hone number: ()	mber: ()		
Country of citizenship (if not USA)	Visa	Type Ethnic Origin (Optional)		
What semester are you planning to register? (0	Check one) Fall 20	Spring 20			
Signature of Applicant		Date			
**************************************	********	***********	********		
Parent/Guardian/Spouse full name		Livin	_Living?_		
Home address (if different from yours)					
Occupation					
Firm					
Colleges attended (if any)			Years		
EDUCATION List most recent secondary schools and colleges		***********	**********		
Name of School/College Cit Attended	y, State, Zip Code	Degree Candidate	Dates		
Name of School/College Cit Attended	y, State, Zip Code	Degree Candidate	Dates		
Reason for attending as non-matriculated studer	nt:				
FOR DEAN'S OFFICE USE ONLY: Please check appropriate non-matriculated student classifie (BLANK) NO SPECIAL TUITION SPEC BASIC SPECIAL STUDENT CREDIT EMP EMPLOYEE OR SPOUSE/ DEPENDE ESCP HWS EDUCATIONAL SECOND CHAN EXP EXPERIMENTAL STATION EMPLOYE FLA FINGER LAKES AREA STUDENT GRAD GRADUATE ATTENDEE HS HIGH SCHOOL STUDENT	NT SON OR DAUGHTER OF EMPLO	YEE			
Signature of Dean		Date			
PLEASE FORWARD TO REGISTRAR'S OFFIC					

FOR	STUDENT	ACCOUNTS	OFFICE USE ONLY:	
1 01	SIUDLINI	ACCOUNTS	OI I ICE USE CIVET.	

TUITION:

COPY DISTRIBUTION: DEAN, REGISTRAR, OFFICE OF STUDENT ACCOUNTS