

FOR OFFICE USE:	
App. Pd.	_____
App. Wa.	_____
ID#	_____
PRSP	_____
ASUM	_____

## APPLICATION FOR PARALLEL ENROLLMENT

Please return this application with the non-refundable \$25 application fee.  
Be sure to fill out the application completely. You must sign and date the application. Please type or print clearly.

**I am applying for the:**

\_\_ Fall 201\_\_ Semester (Deadline June 1)    \_\_ Spring 201\_\_ Semester (Deadline October 1)

**1. Name: Mr. / Ms. / Mrs.** \_\_\_\_\_  
LAST
FIRST
MIDDLE

**2. Social Security Number:** \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_

**3. Permanent Address:** \_\_\_\_\_  
NUMBER & STREET

\_\_\_\_\_  
CITY
STATE
ZIP CODE
COUNTY

**4. Home Phone:** ( \_\_\_\_\_ ) -- \_\_\_\_\_ -- \_\_\_\_\_      **5. E-mail Address:** \_\_\_\_\_

**6. Gender (optional):** \_\_ Male    \_\_ Female      **7. Date of Birth:** \_\_\_\_\_

**8. Citizenship (check one):**  
 \_\_ U.S. Citizen  
 \_\_ Permanent Resident  
 \_\_ Other (Specify) \_\_\_\_\_

International Students: What type of visa do you hold?     B1     F1     PR Immigrant     XX Other (specify) \_\_\_\_\_  
 Please provide the immigration card number along with the month, day, and year below. (All applicants who currently hold a U.S. visa or Alien Registration card must submit photocopies of the front and back of the card. Failure to do so will delay the admission process.)  
 Immigration Number A \_\_\_\_\_      Month/Day/Year \_\_\_\_\_

**9. Optional. How are you most comfortable describing yourself? (Select one or more)**  
 \_\_ American Indian or Alaskan Native      \_\_ Black or African American      \_\_ Hispanic or Latino  
 \_\_ Asian or Pacific Islander      \_\_ Caucasian or White      \_\_ Other \_\_\_\_\_

**10. Provide names of parent(s) or legal guardian:**  
 \_\_ Father    \_\_ Mother    \_\_ Other \_\_\_\_\_ Name \_\_\_\_\_  
LAST
FIRST

\_\_\_\_\_  
NUMBER & STREET OF CURRENT MAILING ADDRESS
CITY
STATE
ZIP CODE

\_\_\_\_\_  
HOME TELEPHONE NUMBER
WORK TELEPHONE NUMBER

\_\_ Father    \_\_ Mother    \_\_ Other \_\_\_\_\_ Name \_\_\_\_\_  
LAST
FIRST

\_\_\_\_\_  
NUMBER & STREET OF CURRENT MAILING ADDRESS
CITY
STATE
ZIP CODE

\_\_\_\_\_  
HOME TELEPHONE NUMBER
WORK TELEPHONE NUMBER

11. High School that you are currently attending: \_\_\_\_\_  
NAME OF SCHOOL

\_\_\_\_\_  
CITY AND STATE OF SCHOOL DATE OF GRADUATION

12. Have you previously taken courses at any university?  Yes  No

\_\_\_\_\_  
COLLEGE Dates: \_\_\_\_\_ -- \_\_\_\_\_ Credits Attempted: \_\_\_\_\_ Credits Earned: \_\_\_\_\_  
FROM TO

\_\_\_\_\_  
COLLEGE Dates: \_\_\_\_\_ -- \_\_\_\_\_ Credits Attempted: \_\_\_\_\_ Credits Earned: \_\_\_\_\_  
FROM TO

13. Have you previously applied to, or taken classes at SU?  Yes (semester and year \_\_\_\_\_)  No

14. If accepted, do you intend to pursue more than one semester as a parallel enrollment student?  
 Yes  No

15. Briefly explain why you wish to become a parallel enrollment student at Stevenson University.

16. List the complete course of study you plan as a parallel enrollment student, by semester. Give each course and title as it appears on the list of Recommended Courses for Parallel Enrollment. Please include first and second choices along with time of day preferences for classes. Your application cannot be processed without this information. Attach additional sheet if necessary.

I certify that this and all information submitted on behalf of my application is true and complete to the best of my knowledge. I understand that falsification or omission of any information I provide could result in the denial of admission or retroactive dismissal from the University without refund or course credit. I authorize any school, colleges, or universities I previously attended to release personal and/or academic information to Stevenson University. Should Stevenson University need to release any of the following information to third-parties as a part of a scholarship competition/selection I consent to such and waive those protections afforded by the Family Educational Rights and Privacy Act of 1974.

**STUDENT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Admission to the University, and the University's scholarship/loan programs, is determined without regard to race, color, sex, religion, national or ethnic origin, or handicap. The University complies with all applicable laws and federal regulations regarding discrimination and accessibility due to the condition of handicap, age, veteran status, and otherwise.