

Undergraduate Nondegree/Visiting Student Application for Indiana University Bloomington

This form is only for enrollment in undergraduate courses. If you are interested in enrolling in graduate-level courses (numbered 500 and above), please visit the University Graduate School in Kirkwood Hall 111, call (812) 855-4010, or visit indiana.edu/~grdschl. If you are working on an IU graduate degree and would like to enroll in undergraduate courses, contact your school for authorization to enroll.

Student Information

Circle enrollment term: Fall Spring Summer Year_____

10-digit Indiana University ID (not SSN, leave blank if not known)

Date of birth

Last name

First

Middle

Mailing address

City, State, ZIP

Phone number

E-mail address

Citizenship Status

Please choose the status below that applies to you:

US Citizen Permanent Resident Other Non-US (specify country and see below)_____

FOR OTHER NON-US: Please take your passport and other visa documentation to the Office of International Services (Franklin Hall 306, www.indiana.edu/~intlsvr, phone 812-855-9086) with this form for authorization to enroll. Students currently enrolled in English language development courses through the Intensive English Program (IEP) should not complete this form; rather, they should discuss the possibility of enrolling in academic course work with IEP.

I certify that the student named above has spoken with an advisor at the Office of International Services about his/her visa status. This student is authorized to enroll on a full-time or part-time basis through the following date_____

Signature of Office of International Services Advisor

Title

Date

Criminal History Disclosure

Have you ever been charged with or convicted of a misdemeanor or felony, or have you engaged in behavior that resulted in mental or physical injury to person(s) or personal property? **If yes, please attach the documentation specified in the paragraph below.** Additional information may be requested and additional time may be required to review this information.

Yes No

We are committed to maintaining a safe learning environment. As such, we require applicants who have been charged with or convicted of a misdemeanor or a felony, or who have engaged in behavior that resulted in mental or physical injury to person(s) or personal property, to disclose that information. A previous conviction or previous conduct does not automatically bar attendance at IU, but does require review. You must provide a brief explanation, including location (city, state, and country) of conviction or previous conduct, as well as dates and court disposition. This needs to be in English. This statement must also give Indiana University permission to access any criminal records.

Admission and Financial Aid Disclosure

If you intend to apply for admission to a program other than the General Studies Degree Program, you must contact the IU Admissions Office at 300 North Jordan Avenue, (812) 855-0661, or on the Web at indiana.edu/~iudadmit to discuss your eligibility.

Nondegree students are not eligible for most types of financial aid. If you have any questions, please contact the Office of Student Financial Assistance in Franklin Hall Room 208, (812) 855-0321, or on the Web at indiana.edu/~sfa.

Continued on reverse side

Student Affiliation

Please choose one of the following affiliations:

- I hold a degree.** I certify that I have already completed an undergraduate degree (or more) or am completing a degree during this current semester.
College/University(ies) that awarded your degree(s) _____
- I'm a student at another IU campus** I am working on an undergraduate degree at another IU campus (not Bloomington). I certify that I am in good academic standing. I understand it is my responsibility to discuss my course choices and how they might meet degree requirements with my academic advisor at my home campus.
Degree/Major _____ Campus _____
- I'm a student at another college/university.** I am working on an undergraduate degree at another college or university (not an IU campus). I certify that I am in good academic standing at that institution and am eligible to return there in the future. I understand it is my responsibility to discuss my course choices and how they might transfer back to my home institution with my academic advisor at that institution. College/University _____
- I have no university affiliation.** I am a high school graduate who is not attending any college or university. I have a high school diploma from _____ high school, year _____. If I am under 21 years of age, I have attached a copy of my high school transcript or GED scores and certify that I have not been denied admission to Indiana University. I understand I am limited to no more than 17 credits maximum in nondegree status.
- Other** My situation does not match any of the categories above. I have attached a detailed letter explaining my situation and why I wish to take classes at Indiana University Bloomington on a nondegree basis.

Referral Information

How did you hear about our program?

- Academic advisor Another student, friend, family Brochure or catalog Employer IU Admissions
 Newspaper Radio World Wide Web Other _____

Why did you choose IUB for nondegree study? _____

Student Signature

I certify that the information submitted in this application is complete and correct to the best of my knowledge, and I understand that submitting inaccurate and false information may result in denial or termination of enrollment at Indiana University. Furthermore, I understand that completing this form for enrollment as a nondegree student does not constitute application for admission to any degree or certificate program offered by IU. I acknowledge it is my responsibility to familiarize myself with the policies, procedures, and deadlines published in the Enrollment and Student Academic Information Bulletin and on the Web at www.registrar.indiana.edu.

Signature _____

Date _____

Return this completed form by e-mail to continue@indiana.edu; by fax to (812) 856-5139; by mail to Bloomington Continuing Studies, Nondegree Enrollment, Indiana University, Maxwell Hall 020, 750 E. Kirkwood Avenue, Bloomington, IN 47405-7101. If you have not attended Indiana University Bloomington within the last 12 months, you will also need to complete the residency forms required by the Office of the Registrar.

Direct all questions by e-mail to continue@indiana.edu or by phone to (812) 855-4991.



RESIDENCE CLASSIFICATION FOR FEE-PAYING PURPOSES AT INDIANA UNIVERSITY

New students whose residence classification for fee-paying purposes has never been determined must complete this form before registering for classes. Students returning to IU after an absence of twelve or more consecutive months must complete this form in order to clarify their residence status.

University ID _____
(if previously assigned) Ten-digit University ID Number

REGISTRATION SEMESTER/YEAR: _____ AUDIT DEADLINE (office use): _____

NAME: _____ DATE OF BIRTH: _____

U.S. VISA TYPE (NON-U.S. CITIZENS ONLY): _____ MILITARY TAX WITHHOLDING STATE: _____
(from leave and earnings statement)

Addresses Where You Have Resided FOR THE PAST 3 YEARS:					
Dates (month/year) From To		Street	City	State	Zip Code

Names and Addresses of Employers FOR THE PAST 3 YEARS:					
Dates (month/year) From To		Employer	City	State	Full-or Part-time

Colleges and Universities Attended FOR THE PAST 3 YEARS (include I.U.):					
Dates (month/year) From To		Institution	City	State	Degree

High School Information:					
Dates (month/year) From To		Institution	City	State	Graduation (month/year)

I certify that the information provided on this form is complete and correct to the best of my knowledge.

STUDENT'S SIGNATURE

DATE

IF YOU ARE UNDER 21, PLEASE SUPPLY THE FOLLOWING INFORMATION:
Name of parents:
Address of parents (street):
(city & state):

FOR OFFICE USE ONLY:
Residence Classification:
Classifier's Initials:
Date:

Name _____ Birth date _____ MM DD YYYY

Have you ever been affiliated with any IU Campus? No or Yes: as Student and/or Employee

Former Name (if applicable): _____

U.S. SOCIAL SECURITY NUMBER or Last Four Digits of SSN: _____
(Full Social Security Number is necessary for awarding of U.S. Federal Student Assistance; Last Four Digits required).

Signature is required to update academic record to new name: _____

MARITAL STATUS: Married or Single GENDER: Female Male

COUNTRY OF CITIZENSHIP: _____ USA VISA TYPE: _____
(If Country of Citizenship Not USA)

USA CITIZENSHIP STATUS: US Native US Naturalized Alien-Permanent Resident Alien-Temporary Resident
(All students: circle one of the four categories above to indicate your US Status)

LOCAL ADDRESS _____ Apt. No. _____
(while classes Address Country Address Line 1: Number and Street Address Line 2
are in session): _____ State Zip Code County (if in Indiana)

CURRENT EMAIL: _____

LOCAL HOUSING TYPE (Circle one of the following): Residence Hall Fraternity Sorority Univ Apt. Other Apt. Rent-Own Home Live with Parent(s)

STUDENT HOME ADDRESS: _____ Apt. No. _____
Effective Date (if future) Address Country Address Line 1: Number and Street Address Line 2

City _____ State / Province _____ Postal Code _____ County (if in Indiana) _____

PHONE (LOCAL): _____ Area Code- _____ Number _____ Ext _____ PHONE (HOME): _____ Area Code- _____ Number _____ Ext _____ Country Code _____

To be completed by the authorizing school or program: _____ Program/Plan (IUBLA) _____ UNIV ID (if assigned) _____ Ten-digit University ID Number _____

IUBLA _____ Admit Term _____ Signature of Dean _____
Campus Primary Program Academic Plan 1

***** Record updated: *****

To be completed by the Office of the Registrar: Search/Match UNIV ID _____ Full Load: Record updated: _____

RESIDENCY: Effective Term _____ Residency _____ Residency Date _____ LCL: _____ STHM: _____

Term Activated Career Number: _____ Term Code: _____ Program Action: _____ Career # _____

QUICK ADMIT - SPECIAL REGISTRATION

R753/0410 Office of the Registrar, Indiana University - Bloomington

Processed by: _____ Date: _____

For Office of the Registrar use:
 IPEDS

Ethnicity Questions - Explanation and Definitions

Institutions of higher education are subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, students are requested to self-identify their race and ethnicity.

The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations. When reported, data will be aggregated and will not identify any specific individual.

Due to recent changes in federal regulations for recording and reporting race and ethnicity (2007, IPEDS* requirements), there are now two questions for your review, one concerning ethnicity (Hispanic origin) and the second concerning race.

Your response is requested to both questions.

Definition for Question 1. Are you Hispanic or Latino?

Are you a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race?

Definitions for Question 2. What is your Race? (Select one or more.)

American Indian or Alaska Native

A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.

Asian

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American

A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Pacific Islander

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

*IPEDS is the abbreviation for the U.S. federal Integrated Postsecondary Education Data System.