

**C.W. POST CAMPUS/LONG ISLAND UNIVERSITY
UNDERGRADUATE APPLICATION FOR NON-MATRICULATED STUDENTS**

Please print, fill out and mail to Office of Admissions, C.W. Post Campus, 720 Northern Blvd., Brookville, New York 11548-1300. You can also fax the form to the Admissions office at 516-299-2137

Submit this application if you are an undergraduate student seeking non-matriculated status for one semester (fall or spring) at the C.W. Post Campus of Long Island University.

Please check one: Personal Enrichment (Attach completed undergraduate personal enrichment form.)
 Visiting (Attach letter of permission from home school.)

List the course(s) you wish to register for:

Social Security Number

Date of Birth

/ /

Male Female

Entry Semester: Fall Spring Year

First Name: _____ Last Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Employer: _____

Job Title: _____

Employers Address: _____

Home Telephone: _____

Citizenship: _____ E-mail Address: _____

Reason for attending C.W. Post at this time? _____

Have you previously applied to C.W. Post? Yes No (If yes, when? Term _____ Year _____)

Have you ever been denied admission to C.W. Post? Yes No (If yes, when? Term _____ Year _____)

Have you ever been suspended or dismissed from any college or university? Yes No

List every High School, College, University and other post-secondary school you have attended beginning with the most recent.

School/College	City/State	From	To	Degree

I understand that my enrollment as a non-matriculated student in no way implies future matriculated status in a degree program. I certify that all information provided is accurate and complete. I further understand that C.W. Post reserves the right to amend or rescind any acceptance if it is discovered that I have withheld or falsified any information.

Type Applicant	
FRH	31
TRF 2 yr school with degree	40
TRF 2 yr school with no degree	41
TRF 4 yr school	42
Visiting	49

Signature and Date