- 2. Complete and save form.
- ${\bf 3.\ Email\ to\ Extended Campus@ncat.edu\ or\ fax\ to\ 336-334-7081.}$

## North Carolina Agricultural and Technical State University

(PLEASE COMPLETE ALL SECTIONS AND SIGN)
ADMISSION APPLICATION FOR VISITING / NON-DEGREE SEEKING STUDENTS

Mail to: North Carolina A&T State University

Office of Extended Learning - Summer Sessions

1020 E Wendover, Suite 101 Greensboro, North Carolina 27405

Application will **NOT** be processed without the \$45 application fee.

The nonrefundable fee may be paid by personal check, money order or cashier's check payable to: North Carolina A&T State University or online here.

This form is <u>NOT</u> an application for admission to the University and <u>IS NOT</u> intended for use by continuing **NC A&T degree students/candidates already admitted to A&T or Post Baccalaureate Studies (PBS).** Please contact either the Undergraduate Admissions Office or The Graduate College.

		TODAY DATE:						
Session(s): Check all that applies	s: Dual Session	Pre-Session	1st Sessi	on	2nd Session	Intersession		
		Fall	Spring	I				
Admission Status:	Visiting Undergraduate	Distance	Learning	High Schoo	l Student	Incoming Fresh	nman	
	Non-Degree Seeking	Student At	hlete	Other S	Specify			
Legal Name:					N.41	011		
Last		First			MI	Other		
Current Mailing Addr	ess: Street	Apt. #	<u> </u>	City		State	Zip	
Telephone Number: (		Αρι. τ		Number: (Evenir	ng) ( )	Giale	•	
Email Address:								
					Telepho	one Number ( )		
	Full Name					, _		
Address: (if different fro								
	Street		Apt#	City		State	Zip	
Date of Birth: Mo Day	Year Place of Birth:	Citv	State/Count	Cou	nty of Residen	ce:	urrently	
Citizenship: US	Nonresident Alie	• •	sident Alien	Country of Ci	tizenship:	0	arrentiy	
•	an US, indicate VISA sta			•		otocopy of your VIS	SA)	
Sex: Male			Black (Non Hispanic)		Asian or Pacific Islander		Hispanic	
Female	(For reporting purposes of	,	White		Other			
Education:								
Have you applied for a			No	Yes	When?			
Have you ever been a		No	Yes	When?				
•	nrolled in classes at NC A8		No					
	lled in any academic institution complete the section below		No	Yes	When?			
, ,	Name of Scho	•	City/State			Dates Atten	ded	
High School:								
College/Undergraduate	e:							
College/Graduate								
Education Completed:	High School	Associate's	*Bachelor's	*Ma	ster's	* Doctoral		
·	*Please submit y	our application to: The	Graduate College	- 120 Gibbs Hall -	Greensboro, N	C 27411		
eligibility. North Caroli	on on purposes determines yon na residency for tuition pur e found at www.ncresider	poses is governed by						
	Iorth Carolina Resident?	<u>ioy.org.</u>		Residency Cert	ification Numbe	er (RCN)		

Yes I claim to be a North Carolina resident for tuition purposes. \*

No I do not claim to be a North Carolina resident for tuition purposes. I understand I will be charged the non-resident tuition rate if enrolled at a North Carolina state-supported institution.

\*If you claim to be a resident, you must complete the residency process with the Residency Determination Service (RDS) at <a href="www.ncresidency.org">www.ncresidency.org</a>. You will receive a Residency Certification Number (RCN) which should either be entered onto you admissions application or provided directly to Office of Extended Learning - Summer Sessions, when available.

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Campus	Cafaty	Questions:
Cambus	Satety	Questions:

Your "yes" answer to one or more of the following questions will not necessarily preclude your being admitted. However, your failure to provide complete, accurate and truthful information will be grounds to deny or withdraw your admission, or to dismiss you after enrollment. For the purpose of the following six questions, "crime" or criminal charge" refers to any crime other than a traffic-related misdemeanor or an infraction. You must, however, include alcohol or drug offenses whether or not they are traffic related.
1) Have you been convicted of a crime? ( Yes ) No
2) Have you ever entered a plea of guilty, a plea of no contest, a plea of nolo contendere, or an Alford plea, or have you received a deferred prosecution or prayer for judgement continued, to a criminal charge? ( Yes ) No  3) Have you otherwise accepted responsibility for the commission of a crime? Yes No
4) Do you have any criminal charges pending against you? ( Yes No
5) Have you ever been expelled, dismissed, suspended, placed on probation, or otherwise subject to any disciplinary sanction by any school, college, or university? Yes No
6) If you have ever served in the military, did you receive any type of discharge other than an honorable discharge? ) Yes ) No ( ) Currently Serving ( Never Served
If you answered "yes" to any of the six questions above, please explain the circumstances below. Attach a second sheet if necessary.
Applicant Signature
You must promptly notify the Admissions Office in writing of any criminal charge, any disposition of a criminal charge, or any school, college, or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you submit this application. Your failure to do so will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.
HOME FOR THE SUMMER - FEE WAIVER (Limited to the first 50 Validated Students)
Eligiblity Requirements:
<ol> <li>Return home to permanent residence in Guilford County for the summer.</li> <li>Enrolled in a University outside of Guilford County during current spring semester</li> <li>Submit Waiver by checking box: Yes requesting Waiver</li> </ol>
IF ADDITIONAL INFORMATION IS NEEDED, THE APPLICANT WILL BE NOTIFIED.
By signing this application, I agree to abide by the policies and regulations of North Carolina A&T State University and to the best of my knowledge, the information I have given i true. I understand that any misrepresentation of facts on this application will be cause for refusal of admission, cancellation of admission, or suspension from the University.
Signature Date

N.C. A&T does not discriminate against employees, students, or applicants on the basis of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law.

Newspaper

Social Media

Friend/Family

Other \_

To help better serve you, we need to know how did you hear about us. Please check all that apply:

Brochure/Flyer

Email/Letter

Website (NCAT)

Radio/Television

Thank you for applying to North Carolina A&T for your summer classes. You may submit your application and make your payment online here. We will register you in the classes once your application is processed and we have received the signed course request form located below.

## NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY

## Approval for Admission As a Non-Degree/Visiting Student

## To Be Completed by the Student:

Students admitted as transient (visiting) students are required to submit this form with the summer sessions application. Print your name, ID#, and address (Permanent and Local) below. You must have your appropriate school/college/university official to complete information below.

Name							
E-Mail:			First	Contact Number:		Middle	
Permanent Address							
Local Address	Street		City	State		Zip	
Local Address	Street		City		State	Zip	
Courses Requested: ((	Click here to v	iew class sched					
TERM SUBJECT	COURSE NUMBER	SECTION	COURSE REF# (CRN)	CREDIT HOURS	START- END TIME	DAYS	
Visiting Students On	.l						
Visiting Students Or	•		OFT • • • • •				
This section is to be coninstitution.	mpietea by th	ie School/Colleg	ge/University if	courses will be trai	nsierrea back	to nome	
The above named stude	ent date of att	endance is			This student	is in good	
standing at							
courses listed above at N	orth Carolina	A&T State Univ	ersity.				
Signature of Home Inst	titution Repre	esentative:					
Contact Telephone Num							
College/School University:							
		IMPORT	CANT NOTICE				

North Carolina State Law requires all undergraduate and graduate students to provide documented proof of the required immunizations.

Students will not be permitted to register without proof of all required vaccines. Please contact the Sebastian Health Center at (336) 334-7880

NOTE: 1. Download forms to your desktop.

- 2. Complete and save form
- 3. Email to ExtendedCampus@ncat.edu or fax to 336-334-7081.

For Office Use Only				
Received:				
Processed:				
Banner ID:				
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if you have questions.