# Non-degree Student Application for Admission

### Directions

#### **SPECIAL STUDENTS:**

Students who have earned four-year college degrees and who do not wish to pursue an additional undergraduate degree are special students.

Complete and submit Application for Admission to the Undergraduate Admission Office
Loyola University Maryland
4501 North Charles Street
Baltimore, MD 21210

Official copy of transcript from
Bachelor degree granting institution.

**DEADLINES** 

November 15: Spring Term May 2: Summer Term July 15: Fall Term

#### **VISITING STUDENTS:**

Students who are enrolled in a degree program at another institution and wish to take courses at Loyola are visiting students. Highly qualified high school students who are deemed prepared for rigorous college coursework may also apply as visiting students.

also apply as visiting students.

Complete and submit Application for Admission to the Undergraduate Admission Office
Loyola University Maryland
4501 North Charles Street
Baltimore, MD 21210

Official copies of all college transcripts.

Authorization from home institution including verification of academic good standing, current enrollment status and a list of Loyola course name(s)

and course number(s) the student is permitted to take.

#### **DEADLINES**

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	n to enter Loyola University Maryland? <u>Year</u> Summer Term-Session I,	<u>Year</u> ☐ Summ	er Term-Session 2, <u>Year</u>			
CHECK ONE: Special Student	Visiting Student Consult the dire	ections to determine	the correct classification			
CHECK ONE: Full-time Student (4 or more courses per semester) Part-time Student						
BIOGRAPHICAL INFORMATION Please typ	PREFERRED NAME if not I	PREFERRED NAME if not Proper First Name				
LAST NAME	PROPER FIRST NAME	MIDDLE	FORMER			
PERMANENT ADDRESS						
CITY	STATE / COUNTRY	ZIP CODE / POSTAL CODE				
HOME PHONE	CELL PHONE					
EMAIL ADDRESS						
BIRTHDATE (month / day / year) SEX	SOCIAL SECURITY NUMBER optional					
	e Female					
COUNTRY OF CITIZENSHIP						
VISA/RESIDENT STATUS FOR NON U.S. CITIZEN	<ul><li>Permanent U.S. Resident (no student visa required)</li></ul>	☐ Non U.S. Resid (student visa r	lent equired, attach copy)			
Regardless of your answer to the prior quest  American Indian or Alaska Native  Black or African American (including Africat  White (including Middle Eastern)	tion, please select one or more of the follo		best describes you: tinent or Philippines)			
FAMILY INFORMATION						
Relatives who attend/attended Loyola Univename	Prsity Maryland or Mt. St. Agnes College. RELATIONSHIP	COLLEGE	DEGREE(S/YEARS)			
		☐ Loyola ☐ Mount Saint Agnes	B.A., MBA, etc.			
		Loyola Mount Saint Agnes				
		☐ Loyola ☐ Mount Saint Agnes				
ALL STUDENTS MUST ANSWER THE FO IF YOU ANSWER YES TO EITHER OR BOTH OF THE FOLL STANCES, AND DESCRIBE HOW THIS EXPERIENCE HAS O	OWING QUESTIONS, PLEASE PROVIDE THE APPROXI					
1. Have you ever been found responsible for a (or the international equivalent) forward (ir ioral misconduct, that resulted in your prob Yes No If Yes, attach explanation.	ncluding post-secondary, if applicable), whe	ether related to acade	emic misconduct or behav-			
2. Have you ever been convicted of, or have lations)? Yes No If Yes, attach ex		ny, or other crime (ex	cluding minor traffic vio-			

☐ I authorize all secondary schools I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

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#### **EDUCATIONAL BACKGROUND**

HIGH SCHOOL		HIGH SCHOOL CEEB CODE (if known)	DATES ATTENDED DA	TE GRADUATED	
ADDRESS		CITY	STATE		
_	d universities you have a	attended after graduating from high scho	ool. Please attach an additio	onal page, if necessary.	
COLLEGE OR UNIVERSITY NAME		DATES ATTENDED	DATE GRADUATED /ANTICIPA	DATE GRADUATED /ANTICIPATED GRADUATION DATE	
ADDRESS		CITY	STATE		
2.					
COLLEGE OR UNIVERSI	IY NAME	DATES ATTENDED	DATE GRADUATED		
ADDRESS		CITY	STATE		
3. COLLEGE OR UNIVERSI	TY NAME	DATES ATTENDED	DATE GRADUATED		
ADDRESS		CITY	STATE		
	ed more than one college ral wholly voluntary? [	e or university, ☐ Yes ☐ No <i>if No, explain</i>			
Have you ever atte	nded Loyola?	No if Yes, provide ID number:			
	niversity Maryland course be verified prior to regist	es, including the course number, you wish ration.	to take.		
COURSE NUMBER	COURSE NAME				
COURSE NUMBER	COURSE NAME				
COURSE NUMBER	COURSE NAME				
COURSE NUMBER	COURSE NAME				
Please provide you	ır local address during te	rm			
ADDRESS		CITY	STATE/COUNTRY	ZIP CODE/POSTAL CODE	
WORK EXPERIE	NCE				
List your work expe	erience, including summe	er or part-time employment.			
TYPE OF WORK		NAME OF EMPLOYER	DATES OF EMPLOYMENT	FULL OR PART TIME	

#### **ALL APPLICANTS**

I certify that all information on the application, high school and college transcripts, and all other materials related to admission and registration is accurate and true. Supplying false information automatically cancels the application for admission and renders the student liable for dismissal if already enrolled, in accord with the University's normal disciplinary procedures.

APPLICANT'S SIGNATURE DATE