



This form must be completed for any student requesting to enroll as a non-matriculated student. Non-matriculated status may be granted by the Program Director to individuals who either have an application in progress or an interest in selected courses without intending to become matriculated. Non-matriculated students must meet the requirements in order to be eligible to register. Completion of this form does not guarantee enrollment approval.

SECTION 1: PROGRAM AND TERM SELECTION

- | | | | |
|-----------------|--|--------------|------------------------------------|
| Choose Program: | <input type="checkbox"/> MBA | Choose Term: | <input type="checkbox"/> Fall |
| | <input type="checkbox"/> Counseling Psychology | | <input type="checkbox"/> Spring |
| | <input type="checkbox"/> Rehabilitation Counseling | | <input type="checkbox"/> Summer |
| | <input type="checkbox"/> School Counseling | | <input type="checkbox"/> Summer I |
| | <input type="checkbox"/> Special Education | | <input type="checkbox"/> Summer II |

SECTION 2: BACKGROUND INFORMATION-Complete all information below:

Today's Date:	_____	SSN:	_____
Last, First, MI:	_____	Date of Birth:	_____
Mailing Address:	_____	Cell Phone:	_____
City, State, Zip:	_____	Home Phone:	_____
Personal Email:	_____	Work Phone:	_____
Emergency Contact (EC):	_____	EC Phone:	_____

Check here if you have submitted your official transcripts of all colleges/universities attended to Graduate Studies at the address listed below. Please note that you will not be allowed to enroll until Graduate Studies has received your transcripts and the program has approved your request to enroll.

Check here if will be forwarding your official transcripts, as requested above, to Graduate Studies.

Gender: Female Male

Are you a: US Citizen

Permanent Resident/Alien registration no. _____

Nonresident/Alien/Type of Visa F1 Other-List _____

If a foreign student or nonresident/alien, complete the following: Country of Birth: _____

Native Language: _____ Country of Citizenship _____

SECTION 3: OPTIONAL INFORMATION: ETHNIC/RACIAL BACKGROUND

1. Are you Hispanic/Latino: Yes No

2. In addition-select one or more of the following: American Indian/Alaskan Native

racial categories that best describes you: Asian

Black or African American

Hawaiian/Pacific Islander

White

RETURN THIS COMPLETED FORM BY MAIL TO: Graduate Studies, 500 Salisbury Street, Worcester, MA 01609 or fax to Graduate Studies at 508.767.7030.