

REGISTRAR'S OFFICE

1735 Wahnish Way, C.A.S.S. Bldg., Suite #206 – Tallahassee, FL 32307 Office: (850) 599-3115 Fax: (850) 561-2428 Email: registrardocs@famu.edu

NON-DEGREE SEEKING STUDENT APPLICATION FORM

(Please attach to this application the following: Official proof of residency; a minimum of two (2) Florida Documents are required (Examples: Florida Driver's License, Florida Voter's Registration or Florida Vehicle Registration); *Official transcripts of last obtained degree/diploma and *Immunization Records)

NOTE: ALL information requested on this form and the documents above must be provided in order for your Non-Degree admission application to be processed. Incomplete application packets will be returned without processing.

1. Name:	r					Pay	ment I	- nformati	on	
Print Last Name		Print First Name		Print	Print Middle Name		1.) The Application Fee is \$5.00 each.2.) Payment method:			
2. Soc. Sec. #		NATION OF BIR'		ГН П	Money Order					
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3. Of what country are you a citizen? 4.		. E-MAIL Address	s:			(one time	e only for	new applic	cants)	
5. Permanent Mailing Address:		6.	Local Mailing Add	ress:						
N	ame & Street				Name &	& Street				
C	ity or Country	State	Zip Code		State or	r Country		State Zi	ip Code	
7. Ethic Origin (Required by U.S. De	ept. of Education u	nder Title VI of th	e Civil Rights A	ct)						
Check One: Black (not Hispanic origin) White (not Hispanic origin) Hispanic Asian or Pacific Islanders American Indian or Alaskan Other (Specify)										
8. Sex 9. Date of Birth: Male Female Mo. Day Year Single Home: () - Married Business: () - Other Cell: () -									r fee	
14. What is your expected major?										
15. Date of first courses at FAMU / (On-Campus or Off-Campus)										
16. List the Name of the High School you graduated from and date: Name Month Year										
HIGH SCHOOL CODE /										
17. DESIRED USE OF CREDIT: Certification Undergraduate Degree* Graduate Degree* Prof. Advancement Degree Validation										
	t to earn a degree, you must submit an Application to FAMU				Degrees Earned		Degrees Expected			
Name of last colleges and/or universities that y	you've attended.	Location			Degree Yes	Mo. Yr.	Degree Yes	Mo.	Yr.	
					□ No □ Yes		☐ No ☐ Yes			
					☐ No		☐ No			
					☐ Yes ☐ No		☐ Yes ☐ No			
					☐ Yes ☐ No		☐ Yes ☐ No			
Withdrawal – To withdraw from one or more cot (Special) Student must submit a written request to Registrar Office, 1735 Wahnish Way, C.A.S.S. E Tallahassee, FL 32307. Refer to the University Calendar for withdrawal of I hereby certify that the above information	☐ HIGH SCHOO ☐ SENIOR CITI ☐ EVEN/WEEK	NT STATE EMPLOYEE HOOL/DUAL ENROLL FAMU EMPLOYEE CITIZEN COMMUNITY COLLEGE/DUAL ENROLL								
Signature of Student:			_	Date:						
REGISTRAR'S USE ONLY: DO NOT WRITE BELOW:										
CLASSIFICATION CIRCLE ONE: Freshman, Sophomore, Junior, Senior or Graduate Student	HOLDS	DEGREE CURRENTLY	RESIDENCY CODE	FAMU ID#		STAFF INITIAL:	I	DATE PROC	CESSED	