

# Non-Matriculating Undergraduate Application for Admission

## PERSONAL INFORMATION (Please print clearly in ink)

Name: \_\_\_\_\_  
LAST/SURNAME FIRST MIDDLE PREFERRED

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  Male  Female

### Home Address

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) Cell Phone: ( \_\_\_\_\_ )

Please call me on my:  Home Phone  Cell Phone Would you like to receive Text Message updates?  Yes  No

Email: \_\_\_\_\_ Social Media:  Facebook \_\_\_\_\_  Twitter \_\_\_\_\_

## EDUCATIONAL BACKGROUND

Please list high school currently attending.

School Name	City, State	Dates of Attendance	Graduation Year
_____	_____	_____	_____
_____	_____	_____	_____

GPA: \_\_\_\_\_ (If Taken: SAT Score (math & critical reading only): \_\_\_\_\_ ACT Composite Score: \_\_\_\_\_ TOEFL score (if applicable): \_\_\_\_\_ )

Do you plan to retake any tests? If so, when: \_\_\_\_\_

## BACKGROUND INFORMATION

### Father/Guardian:

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Cairn Alumnus/a:  Yes  No

### Mother/Guardian:

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Cairn Alumnus/a:  Yes  No

**Ethnic Background** (used for government reporting, will not be used in making an admissions decision). Select one or more of the following:

American Indian/Alaskan Native  Asian  Black/African American  Hispanic  Native Hawaiian/Pacific Islander  White

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_