



## UNDERGRADUATE APPLICATION FOR NON-DEGREE STATUS

HAVE YOU PREVIOUSLY ATTENDED LEHMAN COLLEGE AS A MATRICULATED STUDENT, AND DID NOT GRADUATE?  
IF YES, DO NOT COMPLETE THIS FORM. YOU MUST COMPLETE THE APPLICATION FOR READMISSION.

**Semester Applying for:**  Fall 20\_\_\_\_\_  Spring 20\_\_\_\_\_  Summer 20\_\_\_\_\_

**The non-refundable application fee is \$65.00**

Last Name		First Name		Middle Name		Prior Name	
Mailing Address				Apt			
City		State		Zip Code		Country (if non-U.S.A.)	
Daytime Telephone Number			Evening Telephone Number			E-mail Address	
Social Security Number -- --			Date of Birth			Gender <input type="radio"/> Male <input type="radio"/> Female	
Are you U.S. Citizen? <input type="radio"/> Yes <input type="radio"/> No			Immigration Status <input type="radio"/> U.S. Permanent Resident			<b>*OFFICE USE ONLY*</b>  <hr/> <b>Date Processed</b>  <hr/> <b>Initials</b>	
Country of Birth			Alien Registration (I-551) card #				
Country of Citizenship			<input type="radio"/> Other (specify type of visa)				

Please check the appropriate box:

- Do you have a college degree? If yes, you must provide your college diploma.
- If you have attended college(s) and have not graduated, you must provide **the most recent college** transcript(s).
- High school graduates and GED recipients, who have not attended college, must provide high school transcript(s), and/or GED test scores and diploma.
- I have included my \$65.00 application fee.

**Note: Lehman College does not discriminate on the basis of age, sex, race, color, creed, national origin, physical or mental disability, sexual orientation, marital status, alienage or citizenship status, or veteran's status.**

**The college reserves the right to deny admission to any student if in its judgment, the presence of that student on campus poses an undue risk to the safety or security of the college or the college community. That judgment will be based on an individualized determination taking into account any information the college has about a student's criminal record and the particular circumstances of the college, including the presence of a child care center, a public school or public school students on the campus.**

(Over) ➔



**Proof of immigrant or naturalized citizenship status must be shown in the Undergraduate Admissions Office, Shuster Hall, Room 161, when submitting this application. Copies of official documents are not accepted.**

**Important Note for All Students:** To be eligible for New York State resident tuition rates, you must prove that you have been a New York State resident and that you are either a U.S. citizen or permanent resident or that you possess an eligible non-immigrant status. The information requested will be used to determine if you qualify for the New York State resident rate. **A failure to answer these questions will require you to complete the City University Residency Form.**

<b>Where were you and each of your parents born? Check one in each column</b>	You	Mother	Father
Born in the United States, excluding Puerto Rico or U.S. Territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Born in Puerto Rico or U.S. Territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Born outside of the United States	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Country with which you most identify: \_\_\_\_\_

Is a language other than English spoken at home?  Yes  No

With which language are you most comfortable? \_\_\_\_\_

Have you been a New York State resident for the past 12 months?  Yes  No

If yes, please give the month and year New York State residency began \_\_\_\_\_

Did you file a New York City/State resident income tax return during the past twelve months?  Yes  No

Did you file a federal income tax return during the past twelve months?  Yes  No

**List below all your addresses during the past five years, starting from your current address and working backwards: (Attach a separate sheet of paper if necessary).**

From	To	Complete Address
<p>____ - ____</p> <p>Month      Year</p>	<p>____ - ____</p> <p>Month      Year</p>	<p>_____</p> <p>_____</p> <p>City                  State                  Zip Code</p>
<p>____ - ____</p> <p>Month      Year</p>	<p>____ - ____</p> <p>Month      Year</p>	<p>_____</p> <p>_____</p> <p>City                  State                  Zip Code</p>

I certify that the information I have given on this application is accurate and complete and will be treated confidentially for institutional purposes only. ***I understand that the \$65 application fee is non-refundable.*** I understand that non-matriculated (non-degree) students, including non-CUNY visiting students, are not eligible for financial aid at Lehman College.

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

