



UNIVERSITY OF MISSOURI-COLUMBIA
Please Print (In Ink) or Type and DO NOT Write in Shaded Areas

VISITING STUDENT APPLICATION FOR ADMISSION

Return To: 230 Jesse Hall - Columbia, Missouri 65211

NOTE: This application for visitor status is subject to all the admission and registration regulations at this institution. Admission as a visitor does not carry with it permission to register as a degree candidate. Please submit to the Registrar of your present institution for completion of Part II. A visiting student may enroll for no more than two consecutive semesters. Financial aid is not available through MU as a visiting student.

A Visiting Student Must:

1. Be classified and enroll as a visitor.
2. Be in good standing and be eligible to return to the current college or university.
3. Maintain a 2.0 grade point average to reapply as a visitor.
4. Have established at least 24 semester hours of college work.
5. Possess the necessary prerequisites for enrollment to any course.
6. Earn only undergraduate credit.

PART I (TO BE COMPLETED BY STUDENT)

0	0	0							
---	---	---	--	--	--	--	--	--	--

1. Name				2. Social Security Number					
<i>Last</i>		<i>First</i>		<i>Middle</i>		<i>Maiden</i>			

3. Applicant's Permanent Address and Telephone Number *(This address will be used for all University correspondence prior to your first registration.)*

<i>Number and Street or RFD No.</i>			<i>Apt. No. or Box No.</i>			<i>City</i>			
<i>State</i>		<i>Zip</i>		<i>Country</i>		<i>Area Code</i>		<i>Telephone No.</i>	

4. Address of **Parent or** **Guardian** *(If different from item 3)*

<i>Number and Street or RFD No.</i>			<i>Apt. No. or Box No.</i>			<i>City</i>			<i>State</i>		<i>Zip</i>		<i>Country</i>	

5. Citizen of the U.S.?
 Yes No
 If no, what country? _____

Permanent Resident of the U.S.?
 Yes No
 If yes, attach copy of green card.

LVL-MOD	O.E.C.

6. Sex* <input type="checkbox"/> M Male <input type="checkbox"/> F Female	7. Date of Birth			8. Term of expected entrance <i>(Check One)</i>			
	Month	Day	Year	<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	<input type="checkbox"/> Summer	
Year: _____				_____			

9. Place of Birth

<i>City</i>	<i>State</i>	<i>Country</i>

10. Ethnic Origin* *(Non-Citizen Permanent Residents of U.S. must designate ethnic origin other than Non-Resident Alien.)*

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Black-Non Hispanic	<input type="checkbox"/> White-Non Hispanic
<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Non-Resident Alien (F or J Visa)

11. Name and location of current college or university and dates of attendance.

<i>Current College or University</i>	<i>Location (City & State)</i>	<i>Dates of Attendance</i>

12. Are you a Missouri resident? Yes No
 Tuition and residence information is available from Residency Office, 230 Jesse Hall.

13. LEGAL SIGNATURE <i>(In Ink)</i> I authorize the University of Missouri-Columbia to maintain all my records under this name.	14. Today s Date

* This information is requested for purposes of reporting to Federal Compliance Agencies only and will not be used in determining admission status. Failure to complete this form fully (except questions 6 and 10) or giving of misinformation will void your admission. Complete all items and return this form, with check or money order for the Forty-five dollar (\$45.00) application fee to: Director of Admissions, 230 Jesse Hall, University of Missouri-Columbia, MO 65211. The application fee is not required of former MU students.

PART II
TO BE COMPLETED BY COLLEGE OFFICIAL

DIRECTIONS: This application should be submitted to the Registrar of the college where you are presently enrolled. Part II is to be completed by the college officials and the complete application sent to the Director of Admissions and Registrar, University of Missouri-Columbia. Since this certification is in lieu of an official transcript, the seal of the institution must be affixed.

I certify that _____ is currently
(STUDENT S NAME)

enrolled at _____ is in good academic standing and is eligible
to re-enroll as a () Freshman () Sophomore () Junior () Senior

This form should be mailed to Director of Admissions, 230 Jesse Hall, University of Missouri-Columbia, Columbia, Missouri 65211, by the official signing this form.

Signature _____

Title _____

Institution _____

State (location) _____

Date _____

Notice of Nondiscrimination

The University of Missouri-Columbia does not discriminate on the basis of race, color, religion, national origin, ancestry, sex, age, disability, status as a disabled veteran or veteran of the Vietnam era. Any person having inquiries concerning the University of Missouri-Columbia's compliance with implementing Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 1990 is directed to contact the Assistant Vice Chancellor, Human Resource Services, University of Missouri-Columbia, 130 Heinkel Building, Columbia, MO 65211, (573) 882-4256, or the Assistant Secretary for Civil Rights, U.S. Department of Education.

