

### Office of Undergraduate Studies

Case Western Reserve University 10900 Euclid Ave. Cleveland, Ohio 44106-7028 Phone: 216.368.2928

Fax: 216.368.4718 case.edu/ugstudies

# Visiting Undergraduate Student Fall/Spring Application For students not enrolled as degree candidates at Case Western Reserve University.

## Please type or print.

Student Information								
Last Name	First Name			Middle Initial				
SSN	Permanent Phone Number			Current Phone Number				
Email Address	Date of	Date of Birth (MM/DD/YYYY)		Gender		Marital Status		
				Female Male		Single	Married	
Planned duration of study at CWRU:	Fall(year)				Spring(year)			
Address (Check to which address in	formatio	n should l	be sent.)					
Permanent Address								
City	State				Zip Code			
Current Address					I			
City	State				Zip Code			
Emergency Contact								
		Relationsh	ip to You		Phone	Phone Number		
Street Address City and St			tate Zip			Code		
Demographic Information		1			1			
Place of Birth (City and State/Country)			Citizen of what country?					
			If not a U.S.	citizen, spe	cify visa type	:		
Ethnic Group — Select One (Optional)			White					
American Indian or Alaska Native			Mexican American					
Black or African American			Puerto Rican					
Asian			Native Hawaiian or other Pacific Islander					
Hispanic or Latino			Other					

#### Current Student Status

High school graduate not currently enrolled in any postsecondary school.

High school graduate admitted to (specify college)

College student currently enrolled at (specify college)

College student not currently enrolled in any postsecondary institution.

Please note: Enrollment is not permitted if an application is pending with Undergraduate Admissions or the student has been admitted to a degree

Education						
High School Attended			Date of Graduation			
List in chronological order all undergraduate institutions				ended.		
Undergraduate College		From (date) To (date)		Degree Granted or Expected		
Undergraduate College		From (date) To (date)		Degree Granted or Ex	pected	
Courses in which you intend to enroll (course catalog: ca				edu/registrar/registr	ration/schedule-of-classes)	
Subject	Course Number		Subject		Course Number	
Subject	Course Number		Subject		Course Number	
Subject	Course Number		Subject		Course Number	

## Conditions of Visiting Student Enrollment

A visiting student is defined as one who is attending another college or university and who wishes to transfer to that institution any credits which may be earned at Case Western Reserve University.

A visiting student need not file a formal application for admission but must submit a *Visiting Undergraduate Student Fall/Spring Application*. In lieu of completing the Dean's/Registrar's section, we will accept an official letter from the home institution certifying that the student is in good academic standing, is not subject to disciplinary probation, and is eligible to resume studies at his or her home institution.

An undergraduate visiting student begins the registration process in the Office of Undergraduate Studies. Please call 216.368.2928 to schedule an appointment to meet with the dean who works with visiting students. It is useful to bring a transcript to that meeting.

Visiting students are subject to policies outlined in the <u>Case Western Reserve University Bulletin</u> and <u>Handbook</u> (including registration dates, class withdrawal, academic integrity, etc.).

All registered students of the University may use the services provided by University Health Service as their primary care facility.

<u>University Health Service requires the completion of a medical history and an immunization record by Fall and Spring visiting students.</u>

Medical histories, immunization records, and Case Western Reserve University Medical Plan Waiver forms are available from University Health Service by calling 216.368.2450.

The privilege of enrolling as a visiting student for more than one semester is subject to the following limitations:

- 1. A minimum grade point average of "C" must be maintained.
- 2. All visiting students are limited to a maximum of 30 semester hours as visiting students and may not register in more than five semesters, summer session included.

Credit for course work taken at Case may or may not transfer to or be accepted by a home institution. Please confer with the appropriate official at your home institution if you have questions about the applicability of transfer credit.

Signature	Date

I give permission to my home institution to release information about my academic and disciplinary record.

Last Name	First Name	Middle Initial
Signature		Date

#### TO BE COMPLETED BY YOUR REGISTRAR OR DEAN

I certify that the above named student has our permission to enroll as a visiting student at Case Western Reserve University. The student is in good academic standing and has not been subject to any disciplinary action. The student is eligible to return to his/her home institution.

College/University Name						
Street Address		City and State				Zip Code
Grade Point Average	Hours Earned		Disciplanary Star Good Warning	Pro Cei	bation nsure spension (e.	xplain below)
Explanation/Special Conditions						
Signature of Dean/Registrar				Date		

**Deadlines:** Fall Semester – June 1 Spring Semester – Nov.1

Please return the completed application to:

Case Western Reserve University Office of Undergraduate Studies 10900 Euclid Ave. Sears Building 357 Cleveland, Ohio 44106 Email: ugstudies@case.edu Phone: 216.368.2928 Fax: 216.368.4718