Brooklyn Campus of Long Island University
APPLICATION FOR VISITING STUDENT ADMISSION

1 University Plaza · Brooklyn, NY 11201 · Phone: 718-488-1011 · Fax: 718-797-2399 · Email: admissions@brooklyn.liu.edu

• Visiting semester date: Fall _____ Spring _____ Summer _____ Year 20 _____

• Status: Freshman _____ Transfer _____ Graduate _____

If prior applicant please indicate last semester you applied to Long Island University _____

BIO/ DEMO INFORMATION

First Name_____ **Last Name** _____ **M** _____

Social Security Number _____-_____-_____ **Date of Birth** _____ /_____ /_____

Home Address _____ **Apt./Suite#**_____

City _____ **State**_____ **Zip Code**_____

Mailing Address (If different than home address):
_____ Apt./Suite #_____

City _____ **State**_____ **Zip Code**_____

E-mail Address:_____ **Gender (please circle):** M F

Home Telephone: (____)_____ **Cell Phone**: (____)_____

U.S. Citizen __ U.S. Permanent Resident __ Other Citizenship __ (specify country) _____

If you are not a U.S. Citizen or U.S. Permanent Resident, and are in the United States:

Type of Visa_____ Date entered _____ Expiration Date _____

Which of these best describes your background? (response is optional)

American Indian/Alaska Native __ Asian/Pacific Islander__ Black/Non-Hispanic__ Hispanic__

White/Non-Hispanic __ Other (Please Specify) _____

Visiting from which college _____ **Dates of Attendance** _____

Current Employer (optional) _____ **Position** _____

Please list parent, next of kin, or other person to be contacted in case of emergency

Relationship to student_____ **Contact Number** _____

Please note any health, physical, or psychiatric disabilities (this voluntary self-identification enables LIU to offer appropriate supportive services to facilitate your learning):

_____

_____

Undergraduate students attending and in good standing at other accredited colleges or universities who wish to enroll at the Brooklyn Campus of Long Island University may apply as Visiting Students (non-matriculated). Inquiries should be directed to the Office of Admissions. Admission as a Visiting Student does not imply admission to a degree program at the Brooklyn Campus, and Visiting Students are not eligible to receive Brooklyn Campus financial aid. Visiting Students who wish to pursue a degree at the Brooklyn Campus must apply at the Office of Admissions.

Graduate students who are degree candidates in good standing at other universities may be granted permission to attend courses at Long Island University upon filing a Visiting Student application for the courses and submitting a letter of authorization from the graduate school that they are attending. Courses in the Ph.D. programs and field experience courses need additional departmental approval.

Please visit our website at www.brooklyn.liu.edu to view our entire schedule of classes and check dates, times and seat availability.

Class ID #	Subject	Course #	Section	Credits/Units	Course Title

Please note: By filling in the bubble next to the following three statements, you are agreeing to the terms listed. Failure to fill in all three bubbles will result in your registration not being processed.

- ❒ **I authorize the Office of the Registrar to process registration for the above-listed course (s) in my behalf.**
- ❒ **I understand the course(s) I wish to register may have requisites which I do not wish or need to take.**
- ❒ **I understand it is my responsibility to submit in writing, official notification if I will not be attending and would like to withdraw from my courses and that I am responsible for any fees or fines related to withdrawing from these courses.**

I certify that all information provided is accurate and complete. I further understand that the Brooklyn Campus reserves the right to amend or rescind any acceptance or scholarship award if it is discovered that I have withheld or falsified any information. I understand that an offer of admission to the Brooklyn Campus of Long Island University for a particular program of study and semester does not imply later admission to any other program or for any other semester.

_____ _____

SIGNATURE OF APPLICANT **DATE**

Long Island University does not discriminate on the basis of sex, sexual orientation, race, color, creed, national origin, religion, age, handicap or political belief, in any of its educational programs and activities, including employment practices and its policies relating to recruitment and admission of students.