

Today's Date _____

Global Scholars Program

Application for Admission

Complete the application and **return** it with all requested information to the Field and Interdisciplinary Studies Office, IC 3046, College of DuPage, 425 Fawell Blvd., Glen Ellyn, IL 60137-6599.

Social Security Number ~ ~

Name _____
LAST FIRST (LEGAL) MIDDLE

Address _____
NUMBER STREET APT. NO.

_____ CITY STATE COUNTY ZIP CODE

Primary Phone () _____ Alternate Phone () _____

E-mail Address _____

Male Female Birth Date _____
(Month/Day/Year)

Ethnic Origin (optional):
 Asian or Pacific Islander American Indian/Alaskan Native Black, Non-Hispanic Hispanic
 White, Non-Hispanic Other _____

Country of Origin (optional): _____

Highest Education Level Completed:
 High school Diploma GED Some college credits College certificate
 Associate's Degree Bachelor's Degree Master's Degree Professional Degree Doctorate
 Other _____

_____ Last high school/college attended _____ Month/Year of graduation

_____ Address/City/State/Country _____ Number of credit hours earned (if already a student at C.O.D.)

Do you plan to transfer to earn a Bachelor's Degree? Yes No

Do you plan to graduate from C.O.D.? Yes No
_____ Anticipated graduation date (month/year)

How did you hear about this program?
 High School Counselor/Teacher C.O.D. Admissions Specialist C.O.D. Faculty G.S.P. Representative
 C.O.D. Adviser/Counselor Peer Leader Mailing C.O.D. Web Site
 Campus Event (Jr./Sr. Night, New Student Orientation, etc.) Sent to Home *Class Schedule*
 Other _____

I certify that all of the information submitted is true and correct to the best of my knowledge.

Signature _____ Date _____

For Office Use Only:

Social Security Number ~ ~

Name _____
LAST FIRST (LEGAL) MIDDLE

Name student goes by: _____

Citizenship/Visa Status:

- U.S. Citizen Permanent Resident of U.S. F-1 Student Visa Works Visa (H or L Visas)
 Tourist/Visitor/B-1, B-2 Visas Refugee Other _____

Student accepted: Yes No

Acceptance letter sent: Yes No

Comments: