Summer College
APPLICATION & REGISTRATION FORM
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For Office Use
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Social Security Number _____ – _____ – _____ Sex ❑ M ❑ F Date of Birth _____ – _____ – _____
MM DD YYYY

Last Name_____ First Name_____ M.I. _____

Address _____

City _____ State_____ ZIP _____

Home Phone Number ( ) _____ Cell Phone Number ( ) _____

Citizenship _____ Email Address_____

Are you currently enrolled in LIU Post's A.C.E., S.C.A.L.E. or F.A.S.T. program and in good standing? ❑ YES ❑ NO

Have you previously applied to LIU Post? ❑ YES ❑ NO

Do you have a minimum "B" average in all previous school work? ❑ YES ❑ NO

LIST YOUR HIGH SCHOOL AND ANY COLLEGE PREP PROGRAMS YOU HAVE ATTENDED

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REGISTRATION FORM

SESSION	COURSE NAME (As listed in Schedule)	REG. USE ONLY

I understand that my enrollment in Summer Session in no way implies matriculated status in a degree program and if I wish to continue taking courses beyond this session, I must submit a regular application for admission and supply supporting documentation.

Student's Signature_____ **Date**_____

Parent/Guardian Signature_____ **Date**_____ ***(Required if student under age 18)***

School Counselor/Advisor Signature_____ **Date**_____

Note: Only one 3-credit Summer College course may be taken during the summer. Space is limited.

Only one person may register on this form. Additional forms may be copied. Your registration will not be accepted without your Social Security Number. Please forward this completed form and a copy of your high school transcript to the SUMMER COLLEGE HIGH SCHOOL PROGRAM, Winnick House Administration, Room 210, LIU Post, 720 Northern Blvd., Brookville, N.Y. 11548-1300, phone: 516-299-3741 or fax to: 516-299-3939.