

## 2018 Visiting Undergraduate Student Application

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### MATRICULATION

A visiting undergraduate student is not considered a matriculated student at Hofstra University. To seek matriculation, you must apply using the first-year student or transfer application.

If you have already completed an undergraduate degree, please contact the Graduate Admission Office to apply to Hofstra as an unmatriculated graduate student.

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### FINANCIAL AID

Visiting students are responsible for University tuition, fees, and other applicable charges in effect at Hofstra for the session or semester of attendance. Payment for this registration is the responsibility of the student, and if payment is not received or deferred by the due date, the student will be assessed late fees that are the student's responsibility. If you are taking fewer than 12 credits in one semester at Hofstra, your tuition will be billed at the "part-time undergraduate, 199-level and below courses" rate. If you are taking 12-17 credits in one semester at Hofstra, your tuition will be billed at the "full-time tuition" rate. Please visit [hofstra.edu/tuition](http://hofstra.edu/tuition) for tuition and fee rates.

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### HOUSING

Housing may be available for visiting undergraduate students. Contact the Office of Residence Life at [ResLife@hofstra.edu](mailto:ResLife@hofstra.edu) or **516-463-6930**.

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## A COMPLETED APPLICATION MUST INCLUDE THE FOLLOWING:

### Visiting From a College or University

1. Visiting Undergraduate Student Application.
2. Unofficial or official transcript from current or most recently attended college or university.
3. Completion of Dean of Students Certification and Recommendation Form (pages 6 and 7 of application).
4. A nonrefundable check or money order for \$70 made payable to Hofstra University.

*Note: Visiting undergraduate students are not permitted to enroll in graduate courses at Hofstra University.*

### Visiting From a High School

1. Visiting Undergraduate Student Application.
2. Recommendation from your high school guidance counselor.
3. Official transcript(s) from your high school.
4. A nonrefundable check or money order for \$70 made payable to Hofstra University.

*Note: High school students must have completed their junior year.*

## MAIL COMPLETED APPLICATION TO:

Hofstra University, Office of Undergraduate Admission  
100 Hofstra University, Hempstead, NY 11549-1000

1. PERSONAL INFORMATION

Please print in ink.

\*Please be sure to provide your legal given name.

LAST NAME/SURNAME\* FIRST NAME\* MIDDLE NAME

PREFERRED FIRST NAME OTHER NAMES YOU HAVE USED (i.e., on transcripts, standardized tests, etc.)

PERMANENT ADDRESS LINE 1

PERMANENT ADDRESS LINE 2 (IF APPLICABLE)

CITY/TOWN STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

HOME PHONE NUMBER CELL PHONE NUMBER INTERNATIONAL PHONE NUMBER

I GIVE PERMISSION TO HOFSTRA UNIVERSITY TO SEND ME IMPORTANT UPDATES VIA TEXT MESSAGING. (Standard messaging charges apply.)

EMAIL ADDRESS

DATE OF BIRTH

SEX: FEMALE\*\* MALE\*\*

\*\*Please indicate your sex. If your current legal sex differs from your sex assigned at birth, please feel free to report your legal sex. If you would like the opportunity, we invite you to share more about your gender identity via email to admission@hofstra.edu.

CITIZENSHIP STATUS

U.S. Citizen or U.S. National U.S. Dual Citizen\* U.S. Refugee or Asylee\* U.S. Permanent Resident\* Other \*

\*Indicate country of citizenship: Do you currently hold a valid U.S. visa? Yes No

If "Yes," indicate your current visa type: Date of Entry into the United States:

What college, university or other institution issued your visa?:

If "No," indicate what type of visa you intend to apply for:

IS ENGLISH YOUR NATIVE LANGUAGE? Yes No

If "No," indicate your primary language: How many years have you studied English?

OPTIONAL INFORMATION

- 1. Are you Hispanic or Latino... 2. Select one or more of the following races... 3. Please indicate your U.S. military service status...

**2. FAMILY INFORMATION**

**PARENT 1 OR LEGAL GUARDIAN**

LAST NAME/SURNAME	FIRST NAME	MIDDLE NAME
PARENT 1 RELATIONSHIP: <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> OTHER _____		
IS PARENT 1 LIVING? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ADDRESS (IF SAME AS YOURS, WRITE "SAME.")	CITY/TOWN	STATE/PROVINCE
OCCUPATION	EMPLOYER	EMAIL ADDRESS
( )	( )	( )
WORK TELEPHONE NUMBER	CELLULAR TELEPHONE NUMBER	HOME TELEPHONE NUMBER
COLLEGE(S)/UNIVERSITY(IES) ATTENDED	HIGHEST DEGREE OBTAINED	

**PARENT 2 OR LEGAL GUARDIAN**

LAST NAME/SURNAME	FIRST NAME	MIDDLE NAME
PARENT 2 RELATIONSHIP: <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> OTHER _____		
IS PARENT 2 LIVING? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ADDRESS (IF SAME AS YOURS, WRITE "SAME.")	CITY/TOWN	STATE/PROVINCE
OCCUPATION	EMPLOYER	EMAIL ADDRESS
( )	( )	( )
WORK TELEPHONE NUMBER	CELLULAR TELEPHONE NUMBER	HOME TELEPHONE NUMBER
COLLEGE(S)/UNIVERSITY(IES) ATTENDED	HIGHEST DEGREE OBTAINED	

Parents' marital status (relative to each other):  Never married  Married  Widowed  Separated  Divorced  
 Civil union/domestic partnership

Are you a Hofstra University employee or the legal dependent of a Hofstra University employee?  Yes  No

If "Yes," please provide the applicable Hofstra University identification number: \_\_\_\_\_

To whom should we send communications?  Parents jointly  Father  Mother  Legal guardian

With whom do you make your permanent home?  Both parents  Father  Mother  Ward of court/state  Other \_\_\_\_\_  
 Legal guardian  Self

Are any immediate family members graduates of, or students at, Hofstra University?  Yes  No

NAME	RELATIONSHIP

**3. ACADEMIC INFORMATION**

<b>Semester of entry:</b>	<input type="checkbox"/> January Session 2018 <input type="checkbox"/> Spring 2018 <input type="checkbox"/> Summer Session I 2018 <input type="checkbox"/> Summer Session II 2018 <input type="checkbox"/> Summer Session III 2018 <input type="checkbox"/> Fall 2018	<b>Status:</b>	<input type="checkbox"/> Currently attending high school <input type="checkbox"/> Currently attending college <input type="checkbox"/> Other _____
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Have you applied to Hofstra before?  Yes  No If "Yes," indicate semester and year: \_\_\_\_\_

**HIGH SCHOOL DATA:**

NAME OF HIGH SCHOOL	CITY/TOWN	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY
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CEEB CODE        (If unknown, see guidance office.) GRADUATION DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MO/YR

What is your cumulative high school grade point average? \_\_\_\_\_  Weighted  Unweighted GPA scale \_\_\_\_\_

What is your class rank? \_\_\_\_\_ Graduating class size \_\_\_\_\_

If you earned a GED, when? \_\_\_\_\_ If you earned a GED, what was your standard score? \_\_\_\_\_

**3. ACADEMIC INFORMATION**

*continued*

**COLLEGE/UNIVERSITY DATA:**

Please list all colleges attended.

COLLEGE NAME	CITY/STATE/COUNTRY	DATES OF ATTENDANCE MO/YR TO MO/YR	# CREDITS EARNED/IN PROGRESS
		/ - /	/
		/ - /	/
		/ - /	/
		/ - /	/

**4. ADDITIONAL INFORMATION**

Have you ever been adjudicated guilty or convicted of a misdemeanor or felony, or do you have any charges of a misdemeanor or felony pending against you?

(Note that you are not required to answer "Yes" to this question or provide an explanation if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.)

Yes  No *If "Yes," attach a detailed explanation.*

Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal, or expulsion from the institution, or do you have any charges of disciplinary violations pending against you?

Yes  No *If "Yes," attach a detailed explanation.*

If you are not currently in attendance at a college/university, describe your activities since your last school attendance.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

If there is any additional information you'd like to provide regarding special circumstances, additional qualifications, etc., please use the space provided.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**5. AFFIRMATION**

I confirm that I am currently a student in good standing at \_\_\_\_\_  
*(high school/college/university)*

in \_\_\_\_\_; I am eligible to continue my classes  
*(location)*

at \_\_\_\_\_; there are no pending disciplinary  
*(high school/college/university)*

proceedings against me; I have not been convicted of any felony or misdemeanor charges; and there are currently no pending criminal charges against me.

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE

**6. DECLARATION AND SIGNATURE**

I declare that the information in my application is complete, factually correct, and honestly presented. I grant the appropriate school official(s) permission to release my transcript(s) to Hofstra University.

I waive my right to review or access letters and statements of recommendation written on my behalf.

Yes  No

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE

If accepted as a visiting student, this form will be sent to the Registrar's Office. Course listing is available at [bulletin.hofstra.edu](http://bulletin.hofstra.edu).

**HOFSTRA UNIVERSITY REGISTRATION/ADD/DROP FORM** SEMESTER \_\_\_\_\_

Student's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Hofstra ID# \_\_\_\_\_  
 Please print. Please print.

Level: UG – Visiting Student  Visiting High School Student  Visiting College Student

**COURSE(S) I WISH TO ADD**

CRN	DEPARTMENT	COURSE	SECTION	DAYS	HOURS	# CREDITS
					TOTAL CREDITS	

**COURSE(S) I WISH TO DROP**

CRN	DEPARTMENT	COURSE	SECTION	DAYS	HOURS	# CREDITS
					TOTAL CREDITS	

**By signing below, I understand and agree to all of the following:**

- 1) That high school students or students from other colleges attending classes at Hofstra University are considered visiting students and are responsible for University tuition, fees, and other applicable charges in effect at Hofstra for the session or semester of attendance. Payment for this registration is my responsibility, and, if payment is not received or deferred by the due date, I will be assessed late fees that are my responsibility. [Tuition and fee rates are available at [hofstra.edu/tuition](http://hofstra.edu/tuition) and tuition due dates at [hofstra.edu/academiccalendar](http://hofstra.edu/academiccalendar). Please note there is no financial aid available from Hofstra University for visiting undergraduate students. However, financial aid from your home institution may transfer to Hofstra University. You should consult with your home institution's financial aid office.]
- 2) That I am responsible for formally dropping or withdrawing from classes and that I will be held responsible in accordance with all University policies for tuition and fees as stated in the current online University *Undergraduate Bulletin* for my program of study, regardless of my class attendance.
- 3) That if I do not pay the full amount of my tuition, fees, or other amounts owed to Hofstra, I will be responsible for all costs and expenses associated with the collection of such unpaid amounts, including the fees of any collections agency, which may be based on a percentage of the total balance due (up to a maximum of 45% of the total balance due), and reasonable attorney's fees.
- 4) If a student is under 18 years of age, a parent or guardian must sign below. Parent/guardian signature indicates that the parent/guardian understands and agrees to the above and takes responsibility for payment of all amounts due as stated above.

\_\_\_\_\_  
 Student Signature Date Parent/Guardian Signature (if under 18) Date

**OFFICE USE ONLY**

\_\_\_\_\_  
 Counselor Signature

## DEAN OF STUDENTS CERTIFICATION AND RECOMMENDATION FORM

**TO THE APPLICANT:**

Please complete this section and submit this form to the dean of students at each institution you have attended. Your signature authorizes the release of information regarding your disciplinary record. Failure to submit this form will prohibit review of your application. If you have been involved in any disciplinary action at a previous institution, we strongly encourage you to submit a detailed statement explaining the incident. The completed form must be sent directly to the address listed above or emailed to [applicationupdate@hofstra.edu](mailto:applicationupdate@hofstra.edu).

**Applicant Information**

LAST NAME/SURNAME	FIRST NAME	MIDDLE NAME	
PERMANENT MAILING ADDRESS LINE 1			
PERMANENT MAILING ADDRESS LINE 2 (IF APPLICABLE)			
CITY/TOWN	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY
TELEPHONE			
APPLICANT SIGNATURE (TO AUTHORIZE RELEASE OF STUDENT DISCIPLINARY RECORDS)			DATE

**TO THE EVALUATOR:**

This form is to be completed only by a campus official who has access to and is authorized to release information on disciplinary records. This is not an academic recommendation. Please complete the following information regarding the above-named student, who is applying for admission to Hofstra University. You may use the next page of this form or a separate sheet of paper for additional comments.

1. DO YOU HAVE ACCESS TO STUDENT DISCIPLINARY RECORDS?  Yes  No
2. HAS THE APPLICANT BEEN THE SUBJECT OF ANY DISCIPLINARY ACTION FOR CONDUCT AT YOUR INSTITUTION EITHER ON CAMPUS OR OFF CAMPUS? (If "Yes," please explain briefly on the next page of this form or a separate sheet of paper.)  Yes  No
3. IS THE APPLICANT ELIGIBLE TO RETURN TO YOUR INSTITUTION?  Yes  No
4. HAS THE APPLICANT BEEN SUSPENDED, DISMISSED, EXPELLED, OR FORCED TO WITHDRAW FROM YOUR INSTITUTION FOR DISCIPLINARY REASONS?  Yes  No
5. HOW LONG HAS THE APPLICANT ATTENDED YOUR INSTITUTION? \_\_\_\_\_
6. TO THE BEST OF YOUR KNOWLEDGE, ARE THERE ANY FACTORS THAT WOULD INTERFERE WITH THIS APPLICANT'S ABILITY TO MAKE TYPICAL PROGRESS TOWARD EARNING A DEGREE? (If "Yes," please explain briefly on the next page of this form or a separate sheet of paper.)  Yes  No

Signature	Date
Name (Please print.)	Title/Position
School	Telephone
Email	





# HOFSTRA UNIVERSITY®

516-463-6700 | [hofstra.edu](http://hofstra.edu)

**NONDISCRIMINATION POLICY:** Hofstra University is committed to extending equal opportunity to all qualified individuals without regard to race, color, religion, sex, sexual orientation, gender identity or expression, age, national or ethnic origin, physical or mental disability, marital or veteran status in employment and in the conduct and operation of Hofstra University's educational programs and activities, including admissions, scholarship and loan programs, and athletic and other school-administered programs. For more information, visit [hofstra.edu/eoe](http://hofstra.edu/eoe).

**CAMPUS CRIME REPORTING AND FIRE SAFETY STATISTICS:** In compliance with the federal Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act and other federal law, detailed information on campus security and fire safety, including statistics, is available by accessing the Hofstra website at [hofstra.edu/campusafetyreport](http://hofstra.edu/campusafetyreport) or by contacting the Advisory Committee on Campus Safety. Crime statistics are also available at the U.S. Department of Education website at [ope.ed.gov/security](http://ope.ed.gov/security). The Advisory Committee on Campus Safety will provide upon request all campus crime and fire safety statistics as reported to the U.S. Department of Education. For additional information or a paper copy of the report, please call the Department of Public Safety at 516-463-6606.

**HOFSTRA UNIVERSITY HARASSMENT POLICY:** Hofstra's prohibition against discrimination is also addressed in Hofstra's Harassment Policy. The Harassment Policy prohibits harassment – including sexual harassment and sexual violence – based on race, color, religion, sex, sexual orientation, gender identity or expression, age, national or ethnic origin, physical or mental disability, marital or veteran status. Hofstra University is committed to professional and interpersonal respect ensuring that no individuals are subjected to harassment or discriminated against in any way on the basis of any of these protected characteristics. Harassment based on any of these protected characteristics is a form of discrimination prohibited by law and by Hofstra University's Harassment Policy. The Harassment Policy, which is available online at the link referenced below, contains complaint procedures for resolving complaints of harassment in violation of Hofstra's Harassment Policy. Harassment policy link: [hofstra.edu/harassment](http://hofstra.edu/harassment)