2019 Visiting Undergraduate Student Application

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.

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 for tuition and fee rates.

HOUSING

Housing may be available for visiting undergraduate students. Contact the Office of Residence Life at ResLife@hofstra.edu or 516-463-6930.

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 (the name used on transcripts and standardized tests, for example).

LAST NAME/SURNAME*  FIRST NAME*  MIDDLE NAME*

PREFERRED FIRST NAME: (if different from your legal name)  OTHER NAMES YOU HAVE USED

PERMANENT ADDRESS LINE 1

PERMANENT ADDRESS LINE 2 (IF APPLICABLE)

CITY  STATE/PROVINCE  ZIP/POSTAL CODE  COUNTRY

HOME PHONE NUMBER  CELL PHONE NUMBER  INTERNATIONAL PHONE NUMBER

SEX:  Female  Male

DATE OF BIRTH

Citizenship Status

- U.S. Citizen or U.S. National
- U.S. Dual Citizen*
- U.S. Refugee or Asylee*
- U.S. Permanent Resident*
- Other  If “Other,” indicate country of citizenship and country of birth:

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 (a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)?  Yes  No

2. Select one or more of the following races:  American Indian or Alaska Native  Asian  Black or African-American  Native Hawaiian or Other Pacific Islander  White

3. Please indicate your U.S. military service status (if applicable):  U.S. Military Active Duty  U.S. Reserve or National Guard  Veteran of U.S. Armed Forces  U.S. Military Dependent/Spouse/Widow(er)

Service Dates: (mo/yr)  to (mo/yr)

I give permission to Hofstra University to send me important updates via text messaging. (Standard messaging charges apply.)

Sex:

**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.
2. FAMILY INFORMATION

<table>
<thead>
<tr>
<th>LAST NAME/SURNAME</th>
<th>FIRST NAME</th>
<th>PARENT 1 RELATIONSHIP:</th>
<th>IS PARENT 1 LIVING?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 1</td>
<td></td>
<td>❑ Father ❑ Mother ❑ Other</td>
<td>❑ Yes ❑ No</td>
</tr>
</tbody>
</table>

ADDRESS (IF SAME AS YOURS, WRITE “SAME.”)

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE/PROVINCE</th>
<th>ZIP/POSTAL CODE</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 1 Address</td>
<td>Parent 1 City</td>
<td>Parent 1 State/Province</td>
<td>Parent 1 Zip/Postal Code</td>
<td>Parent 1 Country</td>
</tr>
</tbody>
</table>

OCCUPATION

<table>
<thead>
<tr>
<th>OCCUPATION</th>
<th>EMPLOYER</th>
<th>EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

WORK TELEPHONE NUMBER

<table>
<thead>
<tr>
<th>WORK TELEPHONE NUMBER</th>
<th>CELLULAR TELEPHONE NUMBER</th>
<th>HOME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 1 Work Phone</td>
<td>Parent 1 Cell Phone</td>
<td>Parent 1 Home Phone</td>
</tr>
</tbody>
</table>

Parent 2 OR LEGAL GUARDIAN

<table>
<thead>
<tr>
<th>LAST NAME/SURNAME</th>
<th>FIRST NAME</th>
<th>MIDDLE NAME</th>
<th>PARENT 2 RELATIONSHIP:</th>
<th>IS PARENT 2 LIVING?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 2</td>
<td></td>
<td></td>
<td>❑ Father ❑ Mother ❑ Other</td>
<td>❑ Yes ❑ No</td>
</tr>
</tbody>
</table>

ADDRESS (IF SAME AS YOURS, WRITE “SAME.”)

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE/PROVINCE</th>
<th>ZIP/POSTAL CODE</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 2 Address</td>
<td>Parent 2 City</td>
<td>Parent 2 State/Province</td>
<td>Parent 2 Zip/Postal Code</td>
<td>Parent 2 Country</td>
</tr>
</tbody>
</table>

OCCUPATION

<table>
<thead>
<tr>
<th>OCCUPATION</th>
<th>EMPLOYER</th>
<th>EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

WORK TELEPHONE NUMBER

<table>
<thead>
<tr>
<th>WORK TELEPHONE NUMBER</th>
<th>CELLULAR TELEPHONE NUMBER</th>
<th>HOME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent 2 Work Phone</td>
<td>Parent 2 Cell Phone</td>
<td>Parent 2 Home Phone</td>
</tr>
</tbody>
</table>

3. ACADEMIC INFORMATION

<table>
<thead>
<tr>
<th>Semester of entry:</th>
<th>Status:</th>
</tr>
</thead>
<tbody>
<tr>
<td>❑ January Session 2019</td>
<td>❑ Currently attending high school</td>
</tr>
<tr>
<td>❑ Spring 2019</td>
<td>❑ Currently attending college</td>
</tr>
<tr>
<td>❑ Summer Session I 2019</td>
<td>❑ Other</td>
</tr>
<tr>
<td>❑ Summer Session II 2019</td>
<td></td>
</tr>
<tr>
<td>❑ Summer Session III 2019</td>
<td></td>
</tr>
<tr>
<td>❑ Fall 2019</td>
<td></td>
</tr>
</tbody>
</table>

Have you applied to Hofstra before? ❑ Yes ❑ No If “Yes,” indicate semester and year: __________________________

HIGH SCHOOL DATA:

<table>
<thead>
<tr>
<th>NAME OF HIGH SCHOOL</th>
<th>CITY</th>
<th>STATE/PROVINCE</th>
<th>ZIP/POSTAL CODE</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CEEB CODE □ □ □ □ □ □ □ (If unknown, see guidance office.) GRADUATION DATE __________/____

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

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.
_________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________

4. ADDITIONAL INFORMATION

5. AFFIRMATION

I confirm that I am currently a student in good standing at __________________________ (high school/college/university)
in __________________________ (location);
at __________________________ (high school/college/university)
I am eligible to continue my classes; there are no pending disciplinary 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 __________
**COLLEGE/UNIVERSITY DATA:**

Please list all colleges attended.

<table>
<thead>
<tr>
<th>COLLEGE NAME</th>
<th>CITY/STATE/COUNTRY</th>
<th>DATES OF ATTENDANCE</th>
<th># CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**HOFSTRA UNIVERSITY REGISTRATION/ADD/DROP FORM**

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**

<table>
<thead>
<tr>
<th>CRN</th>
<th>DEPARTMENT</th>
<th>COURSE</th>
<th>SECTION</th>
<th>DAYS</th>
<th>HOURS</th>
<th># CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL CREDITS

---

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

<table>
<thead>
<tr>
<th>CRN</th>
<th>DEPARTMENT</th>
<th>COURSE</th>
<th>SECTION</th>
<th>DAYS</th>
<th>HOURS</th>
<th># CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 and tuition due dates at 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, and 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 visiting 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 student is 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.

Applicant Information

LAST NAME/SURNAME  FIRST NAME  MIDDLE NAME

PERMANENT MAILING ADDRESS LINE 1

PERMANENT MAILING ADDRESS LINE 2 (IF APPLICABLE)

CITY  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

FOR OFFICIAL USE ONLY: VISITING STUDENT APPLICATION
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/eeo.

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/campussafetyreport 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. 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