

**SOUTHERN UNIVERSITY A&M COLLEGE
DIVISION OF CONTINUING EDUCATION
APPLICATION FOR ADMISSION**

Directions: Read carefully before completing application.

Application must be accompanied by a \$35.00 application fee.

(NO CASH or PERSONAL CHECKS ACCEPTED. MONEY ORDERS ONLY)

Please Type or Print Mail to: Division of Continuing Education P.O. Box 9772 Baton Rouge, LA 70813

Social Security Number		Semester entering <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer _____ Year		Today's date	
First name		Middle name		Last name	
Address				City	
State		Zip Code		Parish/County	
Emergency phone number		Emergency contact		E-mail address	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No		Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married	
Race <input type="checkbox"/> American or Alaskan native <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Black/African American <input type="checkbox"/> Other		Resident status <input type="checkbox"/> Louisiana resident <input type="checkbox"/> Non Louisiana resident <input type="checkbox"/> International student		Citizenship <input type="checkbox"/> United States <input type="checkbox"/> U.S. Resident Alien <input type="checkbox"/> Non-citizen	
Name of High School		Address		Religious Preference _____ Indicate Religious Preferred	
Parish		Date of Graduation		City/State/Parish	
Have you attended Southern University? <input type="checkbox"/> Yes If yes, Last semester enrolled _____ <input type="checkbox"/> No		Have you attended any other college or university? <input type="checkbox"/> Yes <input type="checkbox"/> No		GED diploma <input type="checkbox"/> Yes <input type="checkbox"/> No	

If yes, you must list below all colleges or universities attended. A transcript must be submitted from each institution and/or high school or both before full admission to SUBR is complete.

College or university	Location	Dates attended	Date graduated	Type of Degree
College or university	Location	Dates attended	Date graduated	Type of Degree
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What is your objective at SUBR ?
 Classes only; no degree
 Teacher Certification
 Distance Learning
 Non-credit courses

I certify the information given is complete and accurate to the best of my knowledge. I understand that failure to provide complete and accurate information is the basis for rejection of application or suspension.

Signature: _____

Date: _____