

APPLICATION FOR GRADUATE NON-DEGREE STATUS

To apply and register as a Non-Degree student, you must:

Contact the academic department listed below in order to schedule an advisement session and to obtain approval. (You will need to provide a copy of your undergraduate and/or graduate transcripts.)

Dyson College of Arts and Sciences

Biochemistry and Molecular Biology	(212) 346-1853		
Counseling	(914) 773-3309	New York City	Westchester
Environmental Policy	(914) 422-4283		
Environmental Science	(914) 773-3655	School of Education	(212) 346-1338 (914) 773-3829
Forensic Science	(212) 346-1967		
Media and Communication Arts	(914) 773-3790	Seidenberg School of Computer Science and Information Systems	(212) 346-1005 (914) 422-4191
Psychology	(212) 346-1506		
Public Administration	(914) 422-4299		
Publishing	(212) 346-1431		

Submit the department-approved application and registration form with a non-refundable \$70 check or money order to:

Pace University
Office of Graduate Admission
Graduate Application Processing Center
One Pace Plaza
New York, NY 10038
(212) 346-1531
graduateadmission@pace.edu

1. Name _____
Last
First
Middle

2. Female Male (Optional)

3. Current Mailing Address _____

4. Day Telephone (_____) _____ 5. Evening Telephone (_____) _____
Area Code / Number
Area Code / Number

6. Fax (_____) _____ Email _____
Area Code / Number

7. Please indicate the entry term for which you are applying:
 Fall _____ Spring _____ Summer I _____ Summer II _____
Year
Year
Year
Year

8. At which campus location do you plan to attend classes? New York City Westchester

9. Have you previously applied to any graduate program of Pace University? Yes No If yes, please explain: _____

10. Please list in chronological order all institutions attended since your high school graduation.

Undergraduate/Graduate Institution Attended	Location	Dates Attended	Major	Degree Awarded	Date or Expected Date of Degree

If I enroll in the Dyson College of Arts and Sciences as a non-degree student, I confirm that I have the appropriate undergraduate course work or its equivalent for the courses in which I register. If I enroll in the College of Health Professions, Seidenberg School of Computer Science and Information Systems, Lubin School of Business, or School of Education, I confirm that I hold a US bachelor's degree or its equivalent. My signature below further confirms that I do not require a student visa or exchange visitor's visa to attend graduate classes at Pace University. I understand that I may enroll for a maximum of 12 credits as a non-degree student and that I am not guaranteed acceptance to a graduate program of Pace University. I further understand that if I am accepted to a degree program, generally, credit for only two courses successfully completed as a non-degree student may be applied to a program.

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or if I fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, rules, and regulations of Pace University, whether published or unpublished, and I agree to comply with them.

Signature _____ Date _____ / _____ / _____
Month
Day
Year

FOR OFFICE USE ONLY

_____/_____/_____
FEF REC DATE (MM/DD/YYYY)

BY _____

_____/_____/_____
DATA ENTRY DATE (MM/DD/YYYY)

BY _____

REGISTRATION FORM FOR GRADUATE NON-DEGREE STATUS

U _____
 U Number Last Name First Middle

Fall _____ Spring _____ Summer I _____ Summer II _____
 Year Year Year Year

(Course Selection)

(Department Approval)

CAMPUS NY/MT/WT/GC/PL/BR/OC		SUBJECT			COURSE			DAY R=THUR U=SUN		COURSE REFERENCE NO.				CRS
N	Y	X	Y	Z	1	0	0	A	M	9	9	9	9	3

CHAIR SIGNATURE	DATE	GAS/GCS GDN/GED

Please provide information below. (Optional)

DATE OF BIRTH ____/____/____

ETHNICITY (OPTIONAL):

- African-American, non-Hispanic
 Asian or Pacific Islander
 Hispanic
 American Indian or Alaskan Native
 Caucasian, non-Hispanic
 Other _____
 (please specify)

EMERGENCY NAME: _____ RELATIONSHIP _____
 Last First

EMERGENCY ADDRESS: _____

EMERGENCY TELEPHONE: (_____) _____

I understand and agree that my admission, if granted, my registration and continuance on the rolls and graduation are subject to all policies, rules, regulations, and procedures set forth in the current bulletins, catalogs, and other publications, and notices of Pace University and as they may be amended, including but not limited with respect to scholarship, discipline, attendance, immunization requirements, and payment or abatement of fees.

Signature _____ DATE ____/____/____
 Month Day Year

FOR OFFICE USE ONLY

REG. OPERATOR'S SIGNATURE

DATE (MM/DD/YYYY)