

For Office Use Only					
Student ID #	Tentative Acceptance				
□ Resident □ Non-Resident	Final Acceptance				

## Application for Non-Degree Admission

The non-degree category is for applicants who wish to enroll in courses pertaining to their personal interest and who do not want to work toward a formal degree at the University of Idaho

interest and who do not want to work toward	a formar degree at the Oniver	nty of idano.			
Mail to: Office of Admissions University of Idaho PO Box 444264 Moscow, ID 83844-4264	Teleph Fax: Websit E-mail:	(208 e: www	) 885-6326 or (8 ) 885-9119 v.uidaho.edu/ac ssions@uidaho	dmissions	
Semester: (choose one)	□ Fall	□ Spring	□ Summer	Year: _	
Campus: (choose one)	Moscow □ E	Boise □ Id	daho Falls	□ Coeur d'Alene	□ Twin Falls
PLEASE PRINT					
Legal Name:					P. 1.0
Last Other and former names use	d·		First		Middle
Social Security Number (option	nal):		Dat	e of Birth:	
Permanent Address:	Street		City	State	Zip
Permanent Telephone:				Clato	219
Current Address:					
	Street		City	State	Zip
Current Address Valid Until the	ne Following Date:		Cur	rent Telephone:	
E-mail Address:					
Are you a U.S. Citizen?	□ Yes	□ No		try of Citizenship:	e international student advisor.)
Country of Birth:	····		Permanent	Resident Card #	
GENDER: (optional)	Male □ Fe	male Nativ	re Language: glish is not your nat	ive language, proof of Engl	ish proficiency is required.)
ETHNICITY/RACE: (optional)  (check all that apply)	Are you Hispar  ☐ American I ☐ Asian		Native	origin? □ Yes Native Hawaiian/ Oth White	□ No er Pacific Islander
Prior Registration:	, 10.0	an American	_	VVIIIC	
Have you attended University	of Idaho previous	ly? □ No	□ Yes	Date Last Enrolle Student ID #	d

**Please note**: A non-degree student may register for no more than 7 credits each semester and may complete a maximum of 32 semester credits at UI. If you are an international student in F1 or J1 status, you must contact the International Student Advisor. Upon completion of 32 semester credits, the student must either be admitted as a degree-seeking student at UI or submit a letter of appeal to continue as a non-degree student. Any deviations to the admission policy or credit limits will be acted on by the Director of Undergraduate Admissions and/or the Admissions Committee if the student wishes to enroll for undergraduate credit, or by the Associate Dean of the College of Graduate Studies and Director of Graduate Admissions and/or the Graduate Petitions Committee if the student wishes to enroll for graduate credit. Instructor permission is required to enroll in courses numbered 500-600. Permission of the dean of the College of Law is required to enroll in courses numbered 800-999.

Hav	e you graduated from high school?							
□ Y	es Name of High School:					_ Da	te:	
	<u> </u>					_ □	No	
princi	ents currently enrolled in a traditional high school mipal. Students enrolled in a non-traditional high school nt. Students under 16 years of age must also submit wri	ol or in a ho	ome so	hool	must su	ıbmit w	ritten permission	
Res	sidency							
	o residency status MAY be determined by one or mo cable if claiming Idaho residency for tuition purpose						statements that	are
State	of Residence:	From _		_/_	to	/		
If les	s than 12 months, previous state:			_				
Cour	nty of Residence:	From _	/_	_/_	to	/		
If les	s than 12 months, previous county:			-				
fo m	One or more of my parents/legal guardians or spouse's parents or at least 12 months prior to the opening day of the term which by parents/legal guardians.  Parent's Name:	n I plan to enr	oll, <u>and</u>	I rece	ive at lea			
	ddress:							
	from/to	and augrations	. I boy		برامييمير	raaidad	in Idaha far nurnaa	oo otbo
	receive <u>less than</u> 50% of my financial support from parents/lenan education for at least 12 months prior to the opening day o					resided	in idano for purpos	es otne
	am/will be a graduate of an accredited Idaho high school and					the term	immediately follow	ing higl
	chool graduation. am married to an Idaho resident. My spouse is a resident of _				County	_		
	or my spouse is a member of the Armed Forces statio						my spouse is stati	oned i
	County. One or more of my parents/legal guardians, from whom I rec	eive 50% or r	more of	mv s	upport. a	re a me	ember of the Armed	force:
S	tationed in Idaho. They are stationed in	County		, -				
	am an officer or an enlisted member of the Idaho National Gua have been separated under honorable conditions from the Arm		ter at le	ast tw	o vears o	of service	e. At the time of ser	paration
I	designated the State of Idaho as my intended domicile or inc							
	ithin one year of the date of separation. have been away from the State of Idaho for a period of less th	nan 30 month	s. I hav	e not e	establish	ed legal	residence elsewhei	re. I wa:
а	resident of the State of Idaho for a continuous 12 month perio	d immediately	prior to	o depa	ırture.	_		
	am a member of one of the following Idaho American Indicannock; or Kootenai.	ian tribes: C	coeur d'	Alene	; Shosho	ne-Pai	ite; Nez Perce; Sh	oshone
Sig	nature							
or dis applic am e enrol	ning this form, I acknowledge that failure to disclose an smissal from the institution. I certify that all informatic cation, I certify that I am in compliance with the Federa xempt from the same. Men between the ages of 18 an Iment at a state college, to receive state and federal finater on-line at http://www.sss.gov.	on provided I Military Sel Id 25 must b	is com lective e regis	plete Servi stered	and truce Act, with Se	e. Ad 50 U.S lective	ditionally, by sign .C. Section 453, o Service to be elig	ing this or that gible fo
Sign	ature (Required)					Da	ate	

**Please note:** If you are seeking admission to UI as a degree-seeking undergraduate or graduate student, you must complete an application for admission and meet all admission criteria. Undergraduate applications for UI are available at the Office of Undergraduate Admissions or by calling (208) 885-6326; graduate applications for admission are available at the Office of Graduate Admissions, or by calling (208) 885-4001.



## Admissions Office

875 Perimeter Drive MS 4264 Moscow, ID 83844-4264

Phone: 208-885-6326 Fax: 208-885-9119 admissions@uidaho.edu www.uidaho.edu/admissions

## Applicant's Full Name (please print):

## ADDITIONAL INFORMATION FORM

As Pro cor

Process	of the application process, every applicant to the University of Idah- ing of your admission file will not continue until these questions hav ted form and any required personal statements to the Admissions Of	we been answered. Please mail, e-mail or fax this		
	Have you ever been found responsible for a disciplinary violation a the 9th grade forward (or the international equivalent), whether relamisconduct that resulted in disciplinary action? These actions could probation, suspension, removal, dismissal, or expulsion from the education of the educati	ated to academic misconduct or behavioral d include, but are not limited to: reprimand, warning,		
	Other than minor traffic offenses (e.g., speeding, parking tickets, etconvicted, had a withheld judgment, or pleaded no contest to a miso pending against you, or (3) have you been required to register as a sother country? (Note: If the criminal adjudication or conviction herased, or otherwise ordered by the court to be kept confidential, the question, or provide an explanation.)  Yes No	demeanor, felony, or other crime, (2) are such charges sex offender by any legal authority in the U.S. or any has been expunged, sealed, annulled, pardoned,		
of incide	nswered "Yes" to either or both questions, please submit a personal ent(s), and your thoughts on lessons learned from the experience. T tion with all other application information provided when making an	he review committee will consider this statement in		
SIGNA In subm	TURE itting this form to the University of Idaho:			
work, is	tify that (1) all information, documentation and other supporting ma factually true and accurate, and is not misleading; and (2) all documity of Idaho (UI) and will not be returned to me.	terials submitted in the admission process is my own nents I have submitted will become property of the		
authenti	horize UI to communicate with any third party and any third party to city of any information or document that I provide or that is provide disclose information about me, my application, or my records as pa	ed on my behalf to UI. I authorize UI and any third		
□ I understand that I may be subject to a range of possible actions, including but not limited to admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have provided be false, inaccurate, or misleading.				
	tify that I will notify the University immediately should there be any ing material that was submitted in the admission process, including a			
Applica	nt's Signature:	Date of Birth:		
Applica	nt's E-mail Address:	Current Phone:		