



# FSU ACADEMIC & PROFESSIONAL PROGRAM SERVICES

## Special (Non-Degree Seeking) Student: Biographical Form

Year: \_\_\_\_\_ Term:  Spring  Summer  Fall

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

If previously enrolled under another name, print name in full as enrolled: \_\_\_\_\_

Date of first registration at FSU: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of last registration at FSU: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Have you ever applied for admission, or enrolled as a degree-seeking student?  Yes  No

The following information is required for collection of statistical data; however it does not influence approval of registration as a Special Student.

Sex:  Male  Female Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Mailing Address \_\_\_\_\_ Nation of Citizenship \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ County \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone/Pager \_\_\_\_\_ Fax Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Educational History:** List all the colleges or universities that you have attended. Indicate degree and dates received. Attach a separate sheet if additional space is necessary. If you have not received a degree, indicate "none received".

SCHOOL	LOCATION OF SCHOOL	DEGREE RECEIVED	FROM		TO	
			MO.	YR.	MO.	YR.

**Personal History:** Indicate how you have spent the last two years prior to entering the university as a Special Student, including employment.

ACTIVITY	LOCATION OF ACTIVITY	FROM		TO	
		MO.	YR.	MO.	YR.

Failure to answer these questions will result in a delay in processing your application. If your answer to any of the following is yes, attach to this form a full statement of relevant facts. Include a statement describing what you have learned from your past action(s). You may be required to furnish the university with copies of all official documentation explaining the final disposition of the proceedings.

Yes  No Are you currently, or have you ever been charged with or subject to disciplinary action for scholastic or any other type of behavioral misconduct at any educational institution? You do not need to disclose academic dismissal, suspension or probation for poor grades. However, you will be required to furnish FSU with a written explanation of the event(s) if there was academic misconduct (such as plagiarism or cheating) or behavioral misconduct.

Yes  No Have you ever been charged with a violation of the law which resulted in, or if still pending could result in, probation, community service, a jail sentence, or the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200 or more)?

Yes  No Have you ever been charged with a felony (even if adjudication was withheld)? You will be required to furnish FSU with a copy of your criminal background history from each state in which the violation(s) occurred. If the violation(s) occurred in Florida, the criminal background history can be emailed to the Office of Admissions at admsofficer@admin.fsu.edu from the Florida Department of Law Enforcement (www.fdle.state.fl.us).

If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to these questions, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission.

**NOTE:** By signing this document, I understand that course work completed as a Special Student carries no degree credit. Up to 12 credit hours earned as a Special Student may be applied to a graduate degree only with approval of the appropriate department chairperson and dean at the time of reclassification provided that a grade of 3.0 (B) average or better has been achieved. Up to 15 credit hours earned as a Special Student may be applied toward an undergraduate degree only with approval of the appropriate dean at the time of reclassification.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**This form is for admission purposes only. Refer to Academic & Professional Program Services 'Academic Credit Introduction Packet' for registration information.**

### Office Use Only

Registrar: \_\_\_\_\_

Health History Received

Residency Classification Received

1st MAT Date: \_\_\_\_\_

Admission Date: \_\_\_\_\_

Reg. Confirmation Date: \_\_\_\_\_