

# UNIVERSITY OF KANSAS

## APPLICATION AND ENROLLMENT FORM FOR HIGH SCHOOL CONCURRENT ENROLLMENT

### DEADLINES FOR COURSES:

COURSE	LAST DAY TO CANCEL (NO W ON TRANSCRIPT)	LAST DAY TO WITHDRAW	LAST DAY FOR 100% REFUND	LAST DAY FOR 50% REFUND
MATH 101	10/10/2018	3/18/2019	8/30/2018	10/23/2018
ENGL 101 (FALL)	9/10/2018	11/14/2018	8/24/2018	9/17/2018
ENGL 101 (SPRING)	2/11/2019	4/22/2019	1/28/2019	2/18/2019

### 1. APPLICATION INFORMATION:

LEGAL NAME: LAST FIRST MIDDLE OTHER LAST NAMES

PREFERRED FIRST NAME (IF DIFFERENT FROM LEGAL NAME)

MAILING ADDRESS CITY AND STATE ZIP CODE COUNTY (IF KANSAS)

EMAIL ADDRESS WHERE YOU'LL RECEIVE IMPORTANT INFORMATION ABOUT ADMISSION AND SCHOLARSHIPS

SOCIAL SECURITY NUMBER (OPTIONAL)

-  -

HOME PHONE: AREA CODE & PHONE NUMBER

-  -

BIRTH DATE: MONTH/DAY/YEAR

-  -

CELL PHONE: AREA CODE & PHONE NUMBER

-  -

SEX:  FEMALE  MALE

### CITIZENSHIP QUESTIONS

ARE YOU A U.S. CITIZEN?

YES  NO

IF "YES," SKIP TO ENGLISH LANGUAGE QUESTION

IF "NO," ARE YOU APPROVED FOR OR PENDING U.S. PERMANENT RESIDENCY?

YES  NO

PLEASE PROVIDE YOUR ALIEN REGISTRATION NUMBER IF AVAILABLE:

\_\_\_\_\_

IF "NO," WILL YOU HAVE NONIMMIGRANT STATUS (F-1, J-1, H4, ETC.) WHILE AT KU?

YES  NO

IS ENGLISH YOUR PRIMARY LANGUAGE?

YES  NO

### RACE AND ETHNIC BACKGROUND (OPTIONAL)

ARE YOU HISPANIC OR LATINO?

YES, I AM HISPANIC OR LATINO  
 NO, I AM NOT HISPANIC OR LATINO

WHAT IS YOUR RACE?  
(SELECT ONE OR MORE)

AMERICAN INDIAN OR ALASKA NATIVE  
 ASIAN  
 BLACK OR AFRICAN AMERICAN  
 NATIVE HAWAIIAN OR  
OTHER PACIFIC ISLANDER  
 WHITE

Please note: If English is not your primary language, you will be required to prove English proficiency before being allowed to enroll in regular course work. You will be contacted at a later time with more information about this process.

## 2. CONCURRENT ENROLLMENT STATUS:

WHAT SEMESTER DO YOU PLAN TO START?  FALL  SPRING  
YEAR \_\_\_\_\_ FOR WHICH CLASS(ES)  MATH 101  ENGLISH 101

WHAT HIGH SCHOOL ARE YOU CURRENTLY ATTENDING?

LAWRENCE HIGH SCHOOL  LAWRENCE FREE STATE HIGH SCHOOL

HAVE YOU EVER APPLIED TO KU BEFORE?  YES  NO

IF "YES," FOR WHAT SEMSTER AND YEAR DID YOU APPLY? \_\_\_\_\_

## 3. PARENT OR GUARDIAN INFORMATION:

NAME OF PARENT(S) OR GUARDIAN(S) \_\_\_\_\_ RELATIONSHIP(S) \_\_\_\_\_

PARENT / GUARDIAN HOME ADDRESS \_\_\_\_\_ CITY AND STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE: AREA CODE & PHONE NUMBER

-  -

EMAIL (OPTIONAL) \_\_\_\_\_

## 4. KANSAS RESIDENCY:

ARE YOU A RESIDENT OF THE STATE OF KANSAS?  YES  NO

IF "YES," PROVIDE DATES FOR ANY PERIOD YOU HAVE LIVED IN KANSAS:

-  -  TO  -  -   
MONTH DAY YEAR MONTH DAY YEAR

IF "YES," LIST YOUR MOST RECENT KANSAS ADDRESS:

\_\_\_\_\_

LAST YEAR, DID ANYONE CLAIM YOU AS A DEPENDENT FOR INCOME TAX PURPOSES?  YES  NO

IF "YES," PLEASE LIST:

NAME \_\_\_\_\_

RELATIONSHIP TO YOU \_\_\_\_\_

CITY AND STATE \_\_\_\_\_

## 5. STUDENT CERTIFICATION AND SIGNATURE:

I certify that I understand the deadlines associated with participation in concurrent enrollment and that the information provided in this application is true and accurate without evasion or misrepresentation. I understand that this application is a legally binding document and if this information is found to be false or misleading, this fact alone will be sufficient cause for my admission to be denied or revoked and my enrollment to be canceled.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## 6. PARENT / GUARDIAN CERTIFICATION AND SIGNATURE:

I certify that I understand the deadlines associated with participation in concurrent enrollment and that the information provided in this application is true and accurate without evasion or misrepresentation. I understand that this application is a legally binding document and if this information is found to be false or misleading, this fact alone will be sufficient cause for my admission to be denied or revoked and my enrollment to be canceled.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## 7. COUNSELOR CERTIFICATION AND SIGNATURE:

I certify that the student listed above is academically prepared to participate in the courses listed on this application.

COUNSELOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_