APPLICATION FOR NON-DEGREE ADMISSION
(OPEN ENROLLMENT)

ADMISSION
Graduate Liberal Studies offers two forms of admission: open enrollment to non-degree status and admission to the MALS or MPhil degree program. This application is for non-degree status. Any student who has already completed a bachelor’s degree is welcome to register for GLS courses through open enrollment. If you have any questions, please call the GLS office at (860) 685-2900.

Students with a documented disability that requires accommodation should notify Laura Patey at lpatey@wesleyan.edu or 860-685-5581.

Please use the checklist below to ensure that your application is complete.

APPLICATION CHECKLIST FOR OPEN ENROLLMENT (NON-DEGREE)

☐ Application for admission
☐ Immunization compliance form and documentation (sent to Wesleyan Student Health Services; must be received within 5 business days of the start of the term)
☐ Official transcripts (sent directly from the degree-granting institution to the GLS office; must be received within 5 business days of the start of the term)

Application begins on the next page — please keep this page for your records.
1. PERSONAL INFORMATION

Wesleyan ID#: (if applicable) ___________________ Social Security #: ____________________

Last Name: ____________________ First Name: ____________________ Middle Name or initial: ____________

Date of birth: ____________________ Gender: ☐ Male ☐ Female

Address: ______________________________________________________

City, State, Zip: ____________________

Business phone: _______________ Cell phone: _______________ Home phone: _______________

Phone number to contact you in the event of a campus emergency:

☐ Business ☐ Cell ☐ Home ☐ Other: ____________________

Email: ______________________________________________________

Occupation: __________________________________________________

Employer’s name and address: ___________________________________

2. EDUCATIONAL INFORMATION

Undergraduate institution, city and state (required): __________________________________________

Undergraduate degree and date (required, e.g., BA, BS, BFA): _________________________________

Graduate institution, city and state (if applicable): __________________________________________

Graduate degree and date (if applicable, e.g., MA, MS, JD ) _________________________________

Name on previous degree transcript(s) _____________________________________________________

Other schools and programs attended: ____________________________________________________

3. DECLARATION OF ACADEMIC INTEREST

In which term would you like to begin Graduate Liberal Studies at Wesleyan? ☐ Summer 2015 ☐ Fall 2015 ☐ Spring 2016

You have the option of applying for degree candidacy prior to, or after, registering for courses. You also have the option of taking courses through open enrollment in non-degree status, without ever seeking a degree. Please check the appropriate box below:

APPLY FOR NON-DEGREE STATUS

☐ I am registering for courses as a non-degree student and do not intend to apply for degree candidacy.

☐ I am registering for courses as a non-degree student and will decide whether to apply for degree candidacy later.

Application for Admission continued on next page
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4. OTHER INFORMATION

Citizenship: Please check one.

☐ US
☐ Dual US—second country of citizenship ____________________________
☐ Permanent resident—country of citizenship _________________________
☐ Non-USA—country of citizenship _________________________ and Visa type: __________

☐ Yes ☐ No Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution.

☐ Yes ☐ No Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime?
[Note that you are not required to answer “yes” to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered “yes” to either or both questions, please provide the approximate date of each incident, circumstances, and a brief paragraph, reflecting on what you learned from the experience.

The following ethnicity questions are optional. No information you provide will be used in a discriminatory manner.
(Students may select multiple ethnicity categories in a way that helps them best describe their multi-ethnic background.)

1. Are you Hispanic or Latino? ☐ Yes ☐ No
2. Regardless of your answer to the prior question, please check one or more of the following groups in which you consider yourself to be a member:
   ☐ American Indian or Alaska Native (including all Original Peoples of the Americas)
   ☐ Asian (including Indian subcontinent and Philippines)
   ☐ Black or African American (including Africa and Caribbean)
   ☐ Native Hawaiian or other Pacific Islander (Original Peoples)
   ☐ White (including Middle Eastern)

How did you hear about this program? Check all that apply.

☐ Postcard ☐ Radio ☐ Newspaper ☐ Internet Search ☐ Facebook ☐ Friend/colleague ☐ Conference/Expo
☐ Other: ____________________________

Check applicable information. I am:

☐ Wesleyan faculty or staff in ____________________________ department.
☐ Spouse/partner of Wesleyan faculty or staff
   (Spouse/partner’s name and department: ____________________________)
☐ Eligible for the Wesleyan GMAT scholarship (school district: ____________________________)

4. WESLEYAN UNIVERSITY’S HONOR CODE

I have read, understand, and agree to abide by the policies in the GLS Student Handbook (www.wesleyan.edu/masters), the Honor Code and the Code of Non-Academic Conduct Regulations (www.wesleyan.edu/studenthandbook under the header University Standards and Regulations), and the Student Account Agreement and Disclosure Statement (www.wesleyan.edu/masters/pdfs/GLS-SA-Policy.pdf). I understand and accept my obligations as outlined in the codes, and I will uphold Wesleyan’s standards.

Signature (required): ____________________________ Date: ____________________________

Send completed form by fax to 860-685-2901, or by mail or in person to:
Graduate Liberal Studies, Wesleyan University, 74 Wyllys Avenue, Middletown, CT 06459

FOR OFFICE USE ONLY

☐ Application processed Initials: ____________ Date entered: ____________
IMMUNIZATION COVER SHEET

HEALTH SERVICES
327 HIGH STREET
MIDDLETOWN, CT 06459

Please keep a copy of all documents submitted for your personal records
For more information, please visit our website at www.wesleyan.edu/masters

PLEASE RETURN TO UNIVERSITY HEALTH SERVICES

PERSONAL INFORMATION

Wesleyan ID#: ____________________ or Date of Birth: ____________________
Name: ________________________________________________________________
Address: ______________________________________________________________
City, State, Zip: ________________________________________________________
Email Address: _________________________________________________________

In which term would you like to begin study with Graduate Liberal Studies at Wesleyan University?

☐ Summer 2015  ☐ Fall 2015  ☐ Spring 2016

INSTRUCTIONS

State of CT regulations require students to provide proof of adequate immunization against measles, mumps, rubella (MMR) and chicken pox (varicella).

- Please indicate the documentation provided by you or your physician as proof of adequate immunization or the exemption that applies to your situation
- Send this cover sheet with indicated documentation to:

  University Health Services
  327 High Street
  Middletown, CT 06459
  or fax it to (860) 685-2471

DOCUMENTATION PROVIDED

<table>
<thead>
<tr>
<th>Measles, mumps and rubella (MMR)</th>
<th>Chicken pox (varicella)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation of immunization series:</td>
<td>Documentation of immunization series</td>
</tr>
<tr>
<td>• 2 doses of MMR vaccine</td>
<td>• 2 doses of varicella vaccine</td>
</tr>
<tr>
<td>• Separated by at least 28 days</td>
<td>• Separated by at least 28 days</td>
</tr>
<tr>
<td>• First dose on or after 1st birthday</td>
<td>• First dose on or after 1st birthday</td>
</tr>
<tr>
<td>Documentation of laboratory confirmation of immunization</td>
<td>Documentation of laboratory confirmation of immunization</td>
</tr>
<tr>
<td>Documentation that you have had the disease</td>
<td>Documentation that you have had the disease</td>
</tr>
<tr>
<td>Documentation from physician that you are medically contraindicated from receiving these vaccines</td>
<td>Documentation from physician that you are medically contraindicated from receiving these vaccines</td>
</tr>
<tr>
<td>Exemption: I affirm that I was born before January 1, 1957</td>
<td>Exemption: I affirm that I was born before January 1, 1980</td>
</tr>
<tr>
<td>Exemption: I affirm that immunization is against my religious beliefs</td>
<td>Exemption: I affirm that immunization is against my religious beliefs</td>
</tr>
</tbody>
</table>

Student signature ___________________________ Date ___________________________

<table>
<thead>
<tr>
<th>University Health Services Use</th>
<th>GLSP Office Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student meets all requirements – initials and date:</td>
<td>Student record updated:</td>
</tr>
<tr>
<td>Student does not meet requirements because:</td>
<td>Student notified:</td>
</tr>
</tbody>
</table>