



Marist College  
Office of Adult Enrollment  
Poughkeepsie, New York 12601-1347

Phone: 888.877.7900 | Fax: 845.575.3166  
Email: [adulthood@marist.edu](mailto:adulthood@marist.edu) | Website: [www.marist.edu](http://www.marist.edu)

### Personal Data

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle: \_\_\_\_\_

Last name: \_\_\_\_\_  
Name as it appears on your academic records or passport

Social Security #: \_\_\_\_\_ Sex: M  F  DOB (m/d/y): \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Are you a citizen or permanent resident of the United States?  Yes  No  
If no to the above, indicate country of citizenship & birth: \_\_\_\_\_ Type of Visa: \_\_\_\_\_  
Please include photocopy of visa

Are you seeking student visa or F1 status?  Yes  No  
**NOTE: International students must include a copy of their Passport Identification page.**

### Enrollment Status

Date of Intended Enrollment: Fall 20\_\_\_\_ Winter 20\_\_\_\_ Spring 20\_\_\_\_ Summer 20\_\_\_\_

Enrollment Type:  Full-time non-matriculated (12 credits)  Part-time non-matriculated (3-9 credits)  
Have you attended Marist College before?  No  Yes, If so when? \_\_\_\_\_

Do you intend to pursue a degree at Marist College?  No  Yes

Major: \_\_\_\_\_

Intended Course(s): \_\_\_\_\_

### Application Check list

- Official Transcripts (copies accepted)
- Immunization record
- High school diploma or GED (copies accepted)

I certify that the information in this application is accurate.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_