

Special Student Application

1. Completed by Student

Name _____ Date _____
Address _____ Phone _____
City _____ State _____ Zip _____ SS# _____

Background Information

1. Do you have a high school diploma? Yes _____ No _____

Date of Graduation _____ High School _____

2. Have you attended any schools since high school? Yes _____ No _____

School(s) _____ Dates of attendance _____

Did you receive a degree? Yes _____ No _____

Degree(s) received _____ Date received _____

Course(s) you would like to take at Unity College

I understand that the credits recorded will not be applied towards a degree from Unity College unless I become a fully matriculated student at Unity College

Student's Signature _____ Date _____

Registrar's Approval _____
Signature