

## ENROLLMENT APPLICATION 2017 - 2018

## OPENS DOORS TO THE FUTURE Personal Information

Name:	Male	Female	Soc. Sec. #:		
Address:					
		City		State	Zip Code
Home Phone #: ()		Work Phone	e #: ()	<u>-</u>	
Cell Phone #: (		E-mail addre	ess:		
Driver's Lic. #:	State:	Date of Birt	h:/	/	
Citizen Status: U.S Citizen Resident Alien	Eligible Non	-CitizenAli	en#		
Do you require an I-20 Visa? YesNo	Country of C	Citizenship:			
Are you interested in applying for financial aid? Yes_	No	<u> </u>			
Are you a U.S. Veteran? Yes No	VA Clai	m No			
Please provide the following data. This information is requested on a voluntary basis by the U.S. Department of Education (this information will not affect your admission to the university)					
I do not wish to answer this questionAmerican Indian or Alaska NativeAsianBlack		Hispanic Native Hawaiian or White	Pacific Islander		
University Data					
When do you intend to begin your studies?  Fall Semester 2017 AB Winter Semester 2018 AB Summer Semester 2018 AB  Masters BS/BAA.AA.S DiplomaCertificate C.ECredit Course  Program:					
Location:Hialeah Campus (HC)South C				Online Ec	lucation (HC)
Educational Data					
I hereby certify that I have obtained a high school diplo					
Name of the School:			raduation:	/	_/
Address:					
		City		State	Zip Code
Enrollment Acknowledgement					
I certify all statements given in this application are true and accurate to the best of my knowledge. I agree to abide by the rules and regulations of Florida National University as they are stated in the University Catalog published at					
http://www.fnu.edu/Publications/Cataloggeneral.pdf. if available. The enrollment fee is not refundable.				chool record	s and test scores
G. L. C.		D42		-	
Student's signature Date	(For	Parent's signatur unmarried applicants und	eler the age of 18)	Date	