## FLORIDA SOUTHERN COLLEGE NON-DEGREE APPLICATION

Name (First, Middle, Last):		
Social Security #:	Dat	te of Birth:/
Address:	Phone:	· ()
City:	State:	Zip Code:
Email:		Marital Status:
Do you consider yourself to be	Hispanic/Latino?	
$\Box$ Yes $\Box$ No		
In addition, select one or more	of the following racial categories t	o describe yourself:
☐ American Indian or A☐ Asian☐ Black or African Am☐ Native Hawaiian or I☐ White  Note: your response is confidential	nerican	s done by totals.
Gender: ☐ Female ☐ Male	U.S. Citizen: ☐ Yes ☐ No If no	, please list:
Enrollment Type: ☐ Part time ☐	☐ Full time	
Day Program: □ Fall □ Spring	g 🗆 Summer	
OR		
Evening Program:   Fall A	Fall B □ Fall C □ Spring A □	ີ ຊີອກຼ່າກ <b>ຼື</b> ຣູ □ Spring C
Summer	A Summer B Summer C	