SUMMER APPLICATION



Be The Difference.

Thank you for your interest in Summer Studies at Marquette University. This Summer Studies application is for students **new** to Marquette University.

Are you a current Marquette undergraduate student?	Yes	🗌 No
Have you previously earned undergraduate credit from Marquette?	🗆 Yes	🗌 No

If you answered "Yes" to either of the above questions, click the link for Summer Studies at marquette.edu/ registrar for registration information.

PLEASE PRINT

Name:	FIRST	MIDDLE	JR., ETC.
Gender: Male Female	Title: Mr. Miss Mrs.	Ms. Rev. Sr.	Br. Dr. Rabbi
If any of your records are listed unde	r another name(s), please indicate.		
Social Security Number:	Date of birth	/ / /	_
Permanent home mailing address:			
NUMBER AND STREET			
СІТҮ	COUNTY	STATE	ZIP CODE
Home telephone: ()	Cell phone: ()	E-mail:	
Current mailing address if different	t from above:		
NUMBER AND STREET			
CITY	COUNTY	STATE	ZIP CODE
Current telephone: ()	The current address and t	elephone are in effect until:	_///
City of birth:			

Citizenship: U.S. citizen Permanent resident INot a U.S. citizen or permanent resident						
	U.S. legal status					
	Country of citizenship					
Ethnic/racial group: Please indicate your pred	lominant ethnic backgi	ound (optional).				
Hispanic	🗌 Asian (i	ian (including India/Pacific Islander) 🛛 🗌 Black, non-Hispanic				
American Indian or Alaskan Native	White,	White, non-Hispanic Other				
Religious preference: (optional, will be used f	or statistical purposes	only)				
Roman Catholic Episcopalian	U Jewish	_	itecostal/Aposto	lic Other or None Declared		
Baptist Evangelical			Presbyterian			
Eastern Orthodox Muslim	Muslim Methodist United Church of Christ					
College in which you wish to enroll: Check	cone.					
Arts and Sciences			neering	Nursing		
Business Administration	L Education		th Sciences			
Summer Studies Status: Check one						
NEW/VISITING student: Undergraduate Non-Degree (not accepted You have never taken classes at Marquette 		summer.				
Undergraduate Degree (accepted for fall term at MU) If you have applied to Marquette and have been accepted to begin in the fall term, but would like to start during summer.						
Undergraduate Non-Degree (high school student) Visit marquette.edu/programs/summer_studies for the list of requirements prior to completing this form.						
After this summer session I will be enrolled	at:					
My high school						
Marquette University						
Other university						
Are you eligible to return to the school you last	t attended?	Ye	s 🗌 No	If no, attach explanation.		
Have you ever been dismissed from school for	disciplinary reasons	? 🗌 Ye	s 🗌 No	If yes, attach explanation.		
Have you ever been convicted of a felony? Felony conviction may affect your admission quali	fication.	Ye	s 🗌 No	If yes, attach explanation.		
Please read and sign						

I certify that the information given on this application is complete and correct to the best of my knowledge. I understand that any falsification of my records may be cause for the university to void either my admission or registration or to take other appropriate action.

SIGNATURE

DATE

Summer applicants only need to submit an application to begin admission review, however, Marquette may request academic transcripts of applicants if we find it is warranted to finalize our review.

After completing this form, sign and mail, fax or deliver to the address below.

Zilber Hall, 136 1250 West Wisconsin Ave. P.O. Box 1881 Milwaukee, WI 53201-1881

Telephone (800) 222-6544 Fax (414) 288-3764

If you want summer housing information, contact the Office of Residence Life (414) 288-7208 or marquette.edu/orl