

# APPLICATION for Admission as a Visiting Exchange Student

**PLEASE TYPE OR PRINT** Semester Entering:  Fall  Spring 20 \_\_\_\_\_

**CHECK ALL THAT APPLY** 1)  Resident Student  Commuter Student 2)  Full-Time (12-18 hours)  Part-Time (less than 12 hours)

**PERSONAL DATA**

Legal Name: Family (Surname) \_\_\_\_\_ Given (First) \_\_\_\_\_ Middle \_\_\_\_\_

Other name(s) under which your records may be found \_\_\_\_\_ Date of Birth \_\_\_\_\_

Preferred Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ (IF APPLICABLE) - -

Permanent Home Address \_\_\_\_\_  Male  Female

Mailing Address (IF DIFFERENT FROM PERMANENT HOME ADDRESS) \_\_\_\_\_

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Email Address \_\_\_\_\_

Citizenship \_\_\_\_\_

Place of Birth \_\_\_\_\_ Marital Status:  Single  Married  Divorced  Widow(er)

**ACADEMIC DATA:** Please list all colleges at which you have taken courses for credit and have a transcript from each institution sent to the Centenary College Office of Admissions.

Name of College	Location (City/State/Zip)	Degree Received	Dates Attended

Subject(s) Major \_\_\_\_\_

**OTHER INTERESTS:** Please detail your main areas of interest or activity (not directly related to education or work) in order of importance to you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**YOUR SIGNATURE IS MANDATORY.** Your signature below indicates that all the information contained in your application is complete, factually correct, and honestly presented.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Centenary College encourages application for admission from all persons and does not discriminate on the basis of gender, race, color, age, religion, disability, sexual orientation, or national or ethnic origin in its admissions policies, loan programs or other college programs, policies and activities. In compliance with section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, Centenary College will make every reasonable effort to accommodate the needs of its students with disabilities.*



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