

# APPLICATION FOR LIMITED ENROLLMENT

## Office of the Registrar

**SELECT ACTION:** ☐ **ENROLL AS LIMITED UNDERGRADUATE STUDENT**  
☐ **ENROLL AS LIMITED GRADUATE STUDENT**

____ Last Name	____ First Name	____ Student ID#	____ Email
____ Street Address	____ City	____ State	____ Zip
____ Phone No.			

Are you a U.S. Citizen? ☐ Yes ☐ No Race/Ethnicity (optional): \_\_\_\_\_

Date/ Place of Birth: \_\_\_\_\_ Semester you wish to attend Oxy: **Summer 2022**

### COLLEGES PREVIOUSLY ATTENDED – Include Oxy, if applicable.

*Applicant must furnish transcripts showing degrees received.*

____ Occidental College	____ Bachelor of Arts	____ May 15, 2022
____ Name of Institution	____ Degree	____ Date Awarded
____	____	____
____ Name of Institution	____ Degree	____ Date Awarded

### Course(s) in which you wish to enroll:

1. 3020	CORE 200 : Summer Research Program		
____ CRN	____ Dept./Subj	____ Title	____ Instructor Signature
2. _____	_____		
____ CRN	____ Dept./Subj	____ Title	____ Instructor Signature

*I understand that permission to register as a Limited Graduate or Limited Undergraduate Student applies only to the semester indicated above and does not admit me to candidacy for a degree from Occidental. In the event I wish to receive credit in the future toward an Occidental degree or recommendation for a credential, I will file an application for admission to regular standing. I also understand that I must file an application form before the beginning of each semester in which I wish to enroll as a Limited Graduate or Limited Undergraduate Student.*

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

____ Registrar Signature	____ Date	____ Signature not Required: No Registration Fee	____
		____ Student Accounts	____ Date