

# APPLICATION FOR LIMITED ENROLLMENT

## Office of the Registrar

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

☐ **ENROLL AS LIMITED GRADUATE STUDENT**

\_\_\_\_\_  
Last Name First Name Middle 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 2023**

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

*Applicant must furnish transcripts showing degrees received.*

\_\_\_\_\_  
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