

**CHEYNEY UNIVERSITY of PENNSYLVANIA
CONTINUING EDUCATION
APPLICATION FORM
FOR ADMISSION AS A NON-DEGREE STUDENT**

NAME _____
Last Name First Name Middle Previous Name

Home Address _____

City _____ State _____ County _____ Zip Code _____

Home Telephone # _____ Work Telephone _____

Emergency Contact Name: _____

Relationship: _____ Telephone # _____

Are you a citizen of the U.S.? _____ Social Security # _____

Sex M _____ F _____ Date of Birth _____

Plan to Enter _____

Name of Previous College _____

Highest Degree Earned _____ Date(s) Attended _____

Have you ever been a student at Cheyney University? If so when? _____

Course(s) you wish to take during the present term:

No. _____ Course Title _____ Credits _____ Day _____ Time _____

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If admitted to Cheyney University's Continuing Education Program, as a result of this application, you will be registered as a non-degree student. Continuing Education students may transfer no more than 12 credits earned with a cumulative grade point average of 3.0 or better. The decision to accept continuing education courses toward a degree rests with the academic department in which a student seeks to obtain a degree.

Signature: _____ Date _____

Submit your application: Director of Admissions

1837 University Circle
Cheyney, PA 19319
(610) 399 – 2275 fax 610-399-2411
admissions@cheyney.edu