

**SUMMER SCHOOL 2011 GUEST STUDENT APPLICATION - ST OLAF COLLEGE  
FOR NON-ST. OLAF STUDENTS**

This Guest Student admission form is for **Summer 2011 enrollment only**. Although there may be some exceptions for loans, Summer Guest Students are not eligible for financial aid. **Complete and return this form. Have your most recent college attended send a sealed official transcript to:**

**Registrar's Office, Attn: Summer School, St. Olaf College, 1520 St. Olaf Avenue, Northfield, MN 55057**

**COMPLETE LEGAL NAME**

LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_

Social Security Number: \_\_\_\_\_ -- \_\_\_\_ -- \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M / F

Billing Address (if different from permanent home address): \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Religious Affiliation \_\_\_\_\_

If Lutheran, indicate one of the following, (1) ELCA (2) LC-MS (3) WISCONSIN (4) OTHER LUTHERAN

Mother's Name _____	Father's Name _____
Address _____ ( if not the same as your permanent home address shown above)	Address _____ ( if not the same as your permanent home address shown above)
Phone # _____	Phone # _____

I am currently enrolled at: \_\_\_\_\_

I have attended college/university at\*: \_\_\_\_\_ dates of attendance: \_\_\_\_\_

Have you ever attended St. Olaf? [ ] yes [ ] no Name attended under: \_\_\_\_\_ dates: \_\_\_\_\_

High school you graduated from & location: \_\_\_\_\_ dates of attendance: \_\_\_\_\_

(\*Have an **official sealed transcript sent by your college to: St. Olaf Summer School, Registrar's Office** – see address above. **Graduating high school seniors must have an official high school transcript sent to the Registrar's Office** – see address above. **Students who are or have attended another post secondary institution must be in good academic standing**)

**Applicant's signature** \_\_\_\_\_ **Today's date** \_\_\_\_\_

**PREDOMINANT ETHNIC BACKGROUND:**

Data is requested by U.S. Govt. to be in compliance with Title VI of the 1964 Civil Rights Act.

Do you consider yourself to be Hispanic/Latino? Yes/No (circle one)

\_\_\_ American Indian or Alaskan Native \_\_\_ White \_\_\_ Asian

\_\_\_ Native Hawaiian or Pacific Islander \_\_\_ Black or African American

Are you a citizen or national of the United States? Yes/No (circle one)