

**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**

<b>COMPLETE LEGAL NAME</b>	
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 _____  Address _____ ( if not the same as your permanent home address shown above)  Phone # _____	Father's Name _____  Address _____ ( if not the same as your permanent home address shown above)  Phone # _____
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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)