

# EMU UNDERGRADUATE GUEST APPLICATION

## PART 1 (To be completed by applicant)

1. Name: \_\_\_\_\_  
Last First Middle Additional Name(s)
2. \*Social Security #: \_\_\_\_\_ UIC#: \_\_\_\_\_
3. \*Sex:  M  F 4. \*Birth Date: \_\_\_\_\_
5. Citizenship: (Country) \_\_\_\_\_ (Visa Type) \_\_\_\_\_
- 6a. \*Ethnicity:  Hispanic/Latino  Non-Hispanic/Non-Latino
- 6b. \*Race: (May select one or more)
- American Indian or Alaskan Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White
- \*Information is optional and is requested to fulfill obligations to the Federal Government. This information will not be used in a discriminatory manner and will be held confidential. Failure to respond will not subject applicant to adverse action.
7. Current Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address City State ZIP
8. Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address City State ZIP
9. Email Address: \_\_\_\_\_ 10. Are you a veteran?  Yes  No
11. State of Legal Residence: \_\_\_\_\_ County: \_\_\_\_\_ Legal residence since: \_\_\_\_\_
12. Current or last enrolled institution: \_\_\_\_\_  
College or University
13. Guest Term Dates: \_\_\_\_\_ to \_\_\_\_\_  
Month Year Month Year
14. Have you previously applied for admission to this institution?  Yes  No If Yes, when: \_\_\_\_\_
15. Have you previously attended classes at this institution?  Yes  No If Yes, please indicate dates: \_\_\_\_\_
16. Courses that you plan to take: \_\_\_\_\_  
Course Number(s) and Title(s)

Please note that the courses listed will not guarantee enrollment at the guest institution, or transferability to the home institution.

**I certify that the above statements are true. I agree to abide by the regulations of the institutions named above while I am enrolled. I authorize the release of any records from my home institution which guest institution may require.**

Notice of Availability of the Annual Security Report and Annual Fire Safety Report

The Annual Security Report and Annual Fire Safety Report is available online at: [https://www.emich.edu/police/documents/current\\_yearly\\_crime\\_stats.pdf](https://www.emich.edu/police/documents/current_yearly_crime_stats.pdf) The report contains information regarding campus safety and security including topics such as: campus law enforcement authority; crime reporting policies; campus alerts (Timely Warnings and Emergency Notifications); fire safety policies and procedures; programs to prevent dating violence, domestic violence, sexual assault and stalking; the procedures the University will follow when one of these crimes is reported; and other matters of importance related to security on campus. The report also contains information about crime statistics for the three most recent calendar years concerning reported crimes that occurred on campus; in On-Campus Student Housing Facilities; in Noncampus buildings or property owned or controlled by the University or a recognized student organization; and on public property within, or immediately adjacent to and accessible from, the campus. The report also contains fire statistics for any fires occurring in an On-Campus Student Housing Facility during the three most recent calendar years.

If you would like to receive a paper copy of the Annual Security Report and Annual Fire Safety Report, you can stop by the Department of Public Safety at 1200 Oakwood St. or you can request that a copy be mailed to you by calling 734-487-0892 or emailing [dps\\_questions@emich.edu](mailto:dps_questions@emich.edu).

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please continue to complete Part II on the next page

When completing Part II, the registrar can either email/mail the completed form to the EMU Admissions Office or you can arrange to pick up the sealed envelope and bring it to us directly.

## PART II (To be completed by an official at the institution in which the student is currently enrolled)

1. Institution currently or last enrolled: \_\_\_\_\_  
College or University Address City ZIP

2. Enrolled status:  Yes  No If No, last date of attendance: \_\_\_\_\_

4. Academic Standing: 'C' average or better?  Yes  No Eligible to return?  Yes  No

5. Number of credits completed at home institution: \_\_\_\_\_

I certify that the above statements in Part II are true.

\_\_\_\_\_  
Signature of School Official Title Date Phone No.

**College/University Registrar:** Please email completed form to: [transcripts\\_admissions@emich.edu](mailto:transcripts_admissions@emich.edu) or mail to **Undergraduate Admissions, PO Box 921, 401 Pierce Hall, Ypsilanti, MI 48197.**