

Application for Nondegree Study and Certificate Programs

Note: This is not an application for admission to a degree program. If you wish to be admitted to a degree program, please request the appropriate application form. Students enrolled in nondegree and certificate programs are **not** eligible for financial aid.

To apply for admission

1. Complete this form and submit it with the \$30 application fee. This fee can be waived if a Western New England alumnus/a signs the application.
2. Submit a copy of your high school transcript(s)* or GED verification. (Not required for students pursuing graduate coursework.)
3. Submit copies of transcripts* for all post-secondary institutions attended. Students interested in master's level coursework will need to provide a transcript that indicates the appropriate degree was conferred.
4. For students applying to the Leadership Certificate Program—submit a typed one-page, single-spaced personal statement explaining your reasons for pursuing the certificate program.

*An unofficial copy will be sufficient for nondegree study.

All materials should be sent to:

Admissions Office
Western New England University
1215 Wilbraham Road
Springfield, MA 01119-2684
FAX: 413-782-1777
Email: study@wne.edu

PERSONAL INFORMATION

Applicant _____
Last First Middle Social Security Number

Other names that may appear on educational records _____

Mailing Address _____
Number and Street City State ZIP Code

Home Telephone () _____ Cell Phone () _____

Home Email _____

Employer _____

Work Telephone () _____

Birth Date _____ / _____ / _____ Male Female U.S. Veteran? Yes No
MM DD Year

U.S. Citizen or Permanent Resident? Yes No If no, please explain: _____

I want to enroll in: (check one) Fall Winter Spring Summer Year _____

PROGRAM OF STUDY *(please check one only)*

Undergraduate

- Undergraduate Nondegree Courses (please specify)
 - Arts and Sciences
 - Business
 - Engineering

Graduate

- Graduate Nondegree Courses (please specify)
 - Applied Behavioral Analysis*
 - Business
 - Engineering
 - Teacher's Programs
 - Engineering: Green Belt Certificate
 - Engineering: Risk Analysis Certificate
 - Engineering: Supply Chain Certificate
 - Business: Leadership Certificate

If you eventually intend to pursue a degree at Western New England University, list the major: _____

*Courses offered at the New England Center for Children in Southborough, MA

FOR OFFICE USE ONLY

Decision: _____ Initials: _____ Date: _____

EDUCATION

Secondary School (List high school or GED)

Name of Institution	Location	Dates From/To	Date of Graduation

Have you ever enrolled for a college course(s)? Yes No**Colleges** (List all colleges and universities attended)

College/University	Location	Dates From/To	Date of Graduation	Degree Awarded

How did you learn about Western New England University? _____

Have you ever been suspended, dismissed, or expelled from any educational institution? Yes NoHave you ever been convicted of a felony (without the record being sealed or expunged)? Yes No

If you answered "Yes" to either question, please provide an explanation on a separate sheet of paper.

I, the undersigned, acknowledge that by signing this application form, I am hereby financially responsible for any and all tuition, fees, and other charges incurred during my enrollment at Western New England University. Furthermore, I understand that any and all payment terms must be satisfied before the beginning of each academic session, and that failure to do so may prevent me from being able to register at Western New England University for future sessions. I also understand that finance charges will accrue on any and all unpaid balances. Lastly, I understand that I will be financially responsible for all costs related to collection of any and all unpaid balances, including but not limited to attorney fees, collection costs, and further interest. I understand that the application fee is not refundable for any reason.

I certify that the information above is complete and correct to the best of my knowledge, and that I am the original author of any information that is directly requested of me. I understand that my acceptance and matriculation may be canceled if any information in support of my application is found to be false.

*Signature of Applicant*_____
Date

If you are seeking an application fee waiver from a Western New England alumnus/a, please complete the following:

Alumnus/a Name _____

*Signature of Alumnus/a*_____
Graduation Date

OPTIONAL

To meet revised Federal requirements on the collection and reporting of race/ethnicity, please answer the following two statements.

A. I identify myself as Hispanic or Latino, or of Spanish origin: Yes NoB. I identify myself as belonging to one or more of the following groups (Please check **all** that apply, if any):

- | | | |
|---|--------------------------------|--|
| <input type="checkbox"/> Black/African American/Haitian | <input type="checkbox"/> Asian | <input type="checkbox"/> American Indian/Alaska Native |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> White | |

If you answered statement B, please make sure that you also answered statement A.



1215 Wilbraham Road, Springfield, MA 01119

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