

Non-Degree Seeking (Special) Student Registration Request

Use this form to be entered into the student registration system if you wish to register as a non-degree seeking student. The form will be electronically submitted to the Records and Registration Office. An immediate confirmation will be sent to you that the office has received your request. Generally, within 24 hours you will receive an E-mail confirmation and complete instructions on how to register.

Legal Name: _____

First Middle Last

Former Name: _____

First Middle Last

Preferred Name: _____

First Middle Last

Current Address: _____

Street Address Line 1 City State (example – MN)

Street Address Line 2 Zip Code (example – 56301) County (example – Stearns)

Contact Information: _____

Phone Number Email

Emergency Contact: _____

Name Phone Number

Citizen/Resident: _____

- Citizen of the United States: resident of which state? _____ Years: _____ Months: _____
- Resident Alien of the United States
- International Student: Resident of Which Country? _____

I wish to register for SCSU courses because I seek:

- Undergraduate courses with the intention of being admitted
- Undergraduate courses as a lifelong learner
- Graduate courses with the intention of being admitted
- Graduate courses as a lifelong learner

I wish to begin classes: _____

- _____ Year (example – 2021)
- Fall
 - Spring
 - Summer

Educational Experience:

- High School Diploma GED None

Year Received _____

Institution _____

City _____

State _____

Country _____

Do you hold a baccalaureate degree?

- Yes No

If Yes, Institution _____

City _____

State _____

Country _____

Have you attended SCSU before?

- Yes No

Last Attendance: Semester _____ Year _____

Have you submitted an application for undergraduate admission?

- Yes No

Semester _____ Year _____

Have you submitted an application for graduate admission?

- Yes No

Semester _____ Year _____

Please see statement regarding confidential information below.

Birthday: mm _____ dd _____ yyyy _____ SSN: _____/_____/_____
 (necessary for establishment in the registration system)

Select all that apply

Sex shown on your official documents

Sex shown on your official documents is the sex listed on birth certificate, driver's license, passport, or other official document.

- Female Male Other

What is your gender identity?

A person's innermost concept of self as feminine, masculine, neither, or a combination - how individuals perceive themselves. One's gender identity may or may not be influenced by their sex assigned at birth.

(Please select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> agender | <input type="checkbox"/> two spirit |
| <input type="checkbox"/> genderqueer or gender fluid | <input type="checkbox"/> woman |
| <input type="checkbox"/> man | <input type="checkbox"/> additional gender identity Specify Here _____ |
| <input type="checkbox"/> non-binary or non-conforming | <input type="checkbox"/> prefer not to disclose |
| <input type="checkbox"/> trans | |

Are you of Middle Eastern or North African descent?

A person of Algerian, Egyptian, Iraqi, Israeli, Lebanese, Moroccan, Palestinian, Syrian, or other Middle Eastern or North African culture regardless of race

No Yes

(Please select all that apply)

- | | |
|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Algerian | <input type="checkbox"/> Moroccan |
| <input type="checkbox"/> Egyptian | <input type="checkbox"/> Palestinian |
| <input type="checkbox"/> Iraqi | <input type="checkbox"/> Syrian |
| <input type="checkbox"/> Israeli | <input type="checkbox"/> Other |
| <input type="checkbox"/> Lebanese | |

Are you Hispanic or Latino?

A person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race

No Yes

(Please select all that apply)

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Mexican or Mexican American |
| <input type="checkbox"/> Dominican | <input type="checkbox"/> Puerto Rican |
| <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Salvadoran |
| <input type="checkbox"/> Honduran | <input type="checkbox"/> Other |

Race or Ethnic Background: (Please select all that apply)

American Indian or Alaska Native

A person having origins in any of the original peoples of North, Central or South America and who maintains tribal affiliation or community attachment

If you are enrolled in a federally recognized America Indian tribe please indicate your tribal affiliation

Add another affiliation

If you are a descendent but not enrolled in a federally recognized America Indian tribe please indicate your tribal affiliation

Add another affiliation

Asian

A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent

(Please select all that apply)

- | | |
|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Korean |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Lao |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Nepalese |
| <input type="checkbox"/> Hmong | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Indian | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Iranian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Other |
| <input type="checkbox"/> Karen | |

Black or African American

A person having origins in any of the black racial groups of Africa or the Caribbean

(Please select all that apply)

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> African American | <input type="checkbox"/> Liberian |
| <input type="checkbox"/> Ethiopian | <input type="checkbox"/> Nigerian |
| <input type="checkbox"/> Haitian | <input type="checkbox"/> Somali |
| <input type="checkbox"/> Jamaican | <input type="checkbox"/> Other |

Native Hawaiian/Other Pacific Islander

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
(Please select all that apply)

- Chamorro
- Fijian
- Marshallese
- Native Hawaiian
- Samoan
- Tongan
- Other

White

A person having origins in any of the original peoples of Europe, the Middle East or North Africa

Signature required by all special students (non-degree seeking)

I certify that the information given on this form and on all other registration materials is complete and correct to the best of my knowledge. I understand that falsification of information on this form may be cause for SCSU to void my registration or take other appropriate action. ***Note: You must sign your request by entering your name and date below.*

Signature

Date (mm/dd/yyyy)

Private/Confidential Information Collection Notification

PLEASE NOTE: St. Cloud State University is asking you to provide information that includes private and/or confidential information under state and federal law. The University is asking for this information in order to process your application. You agree to provide St. Cloud State University with your data, and the University agrees to process your application.

The University will use your data for the following purposes: 1) to process your application; 2) to follow up on your progress completing the application; 3) for internal business purposes as allowed by law; and not for any other purpose unless required by law or University policy. The University may retain your data in accordance with an applicable records retention obligation or other legal obligation, or at your request.

You have the right to ask for corrections to your data as set forth in Minnesota Statutes § 13.04 Subd. 3. You have the right to avail yourself of the dispute procedures set forth in Minnesota Statutes § 13.08 concerning your data. If you have questions about access to your data, the University can refer you to its Data Practice Compliance Official.

If you are a resident of the European Union, you may have additional rights as set forth in Regulation (EU) 2016/679 of the European Parliament and the Council of Europe, the General Data Protection Regulation. College/university will use commercially reasonable efforts to accommodate those rights to the extent those rights do not conflict with the University's obligations under state and federal law.

You are not legally required to provide the information the University is requesting; however, the University may not be able to effectively process your application if you do not provide sufficient information. With some exceptions, unless you consent to further release of private information, access to this information will be limited to school officials, including faculty who have legitimate educational interests in the information. Under certain circumstances, federal and state laws authorize release of private information without your consent:

- to other schools in which you seek or intend to enroll, or are enrolled;
- to federal, state or local officials for purposes of program compliance, audit or evaluation;
- as appropriate in connection with your application for, or receipt of, financial aid;
- to your parents, if your parents claim you as a dependent student for tax purposes;
- if the information is sought with a subpoena, court order, or otherwise permitted by other state or federal law, and
- to an organization engaged in educational research or an accrediting agency.

Minnesota State Colleges and Universities abide by the provisions of Title IX and other federal and state laws forbidding discrimination on the basis of sex, race, color, national origin or handicap and all other peicstate and federal laws regarding equal opportunity. This document can be made available in alternate formats, such as large print, upon request by contacting St. Cloud State University.

The collection of demographic data is strictly voluntary and utilized only for the purpose of evaluating student recruitment and retention policies. If you choose to provide demographic data to the college/university, you are explicitly consenting to the university's collection, storage, and processing of that data for the purpose of evaluating student recruitment and retention policies.

View the full Minnesota State Privacy Statement <https://eservices.minnstate.edu/adm/public/privacyPolicy?campusId=073>

Office of Records and Registration Use Only

Adm	Date:
Reg	Date: