

## Nonmatriculated and Visiting Student Registration Form

International (Undergraduate and Graduate)

## **ONLINE LEARNING ONLY**

Carefully read the instructions and complete the entire application.

Submit the following items to the Office of the Registrar.

- 1. Completed Nonmatriculated and Visiting Student Registration Form. (Visiting students: please be sure to have the certification at the end of this application completed and signed before submitting).
- 2. **Official college/university transcripts** from each institution you are attending, translated to English.
- 3. **Official score reports** for the Test of English as a Foreign Language (TOEFL) or IELTS if your native language is other than English.

Required materials may be scanned and emailed to visitingstudent@stjohns.edu or mailed to

St. John's University Office of the Registrar Newman Hall, Room 106 8000 Utopia Parkway Queens, NY 11439

Important: Please print clearly.		
Date of Birth (Month/Day/Year)		
I plan to start in Fall 20 (Septemb	per) Spring 20 (January) (	Summer 20
Applicant's Last Name (Surname)	First Name (Given Name)	Middle Name
Address (Number and Street Address)		Apartment No.
City	State/Province Zip/Postal Code	Country
Cell Phone (including area code)	Work Phone (including area code)	
Email Address		
Have you previously attended St. John's University?	Yes No	

Citizenship
I am a O US Citizen O Non-US Citizen O Permanent Resident O Other
If you are a non-US citizen, please indicate your country of citizenship.
If you have a nonimmigrant visa, please list type.
Are you planning to enter the US on an F-1 visa in order to study at St. John's University?  Yes  No
Academic Plans
Please indicate your current major.
Major Major
Ethnic Origin (Optional)
Please check one:
Hispanic or Latino/Latina Not Hispanic or Latino/Latina
Select one or more categories:
American Indian or Alaskan Native  Native American or Alaskan Native  Black or African American  Black, African American  Hispanic, Cuban  Hispanic, Mexican  Hispanic, Mexican  Pacific Islander  Pacific Islander  Native Hawaiian  Pacific Islander  White  Arab, N. African, Middle Eastern  Asian, Other  Caucasian, All Other Heritage
Religious Affiliation
Please check one:
O Baptist O Islamic O Mormon/LDS O Russian Orthodox O Other
Buddhist
○ Episcopal     ○ Jewish     ○ Presbyterian     ○ Sikh       ○ Greek Orthodox     ○ Lutheran     ○ Protestant     ○ Nondenominational
Hindu Methodist Roman Catholic None
Educational Background
Name of College/University
City State From (Month/Year) To (Month/Year)
Graduation Date or Expected Graduation Date
Standard Test Scores-International Students Only
If you are an international student, please indicate below all the dates on which you have taken and/or plan to take the TOEFL or IELTS. Please have all test scores sent to St. John's University. When applying for the tests, indicate that St. John's is to receive score reports.
Month/Year Month/Year Month/Year
Month/Year Month/Year Month/Year  TOEFL

Courses to B	Se Taken at St. John's							
Please indicate	e courses in order of prefer	ence. For a list of availabl	e courses, visit ww	w.stjohns.edu/course	S.			
Subject	Course Number	Course Reference Number [CRN]	Credit Hours	Summer Session ( Presession Summe		ostsession	Fall Spring	g
Previous Dis	smissal or Suspension					_	_	
•	er been disciplined for n nry educational institution	· ·			from any second Yes	dary or		
Have you be	en convicted of a felony	? If yes, please explain	on a separate pi	ece of paper.	Yes 🔘	No 🔾		
Your Signate	ure							
	gned, agree to abide by all rein is, to the best of my kn						All information	
Signature				Date (Mor	nth/Day/Year)			
Certification	n							
Certificatio	on for Students Enro	lled in Other Institu	itions of Highe	er Education (Vis	iting Students	s Only)		
This is to cer	tify that		is ir	n good standing at				and
has pormissi	ion to register for the c	Student Name			I	Name of In:	stitution	
nas pennissi	ion to register for the C	טעוזבא וואנפט מטטעפ.						
	Signature of Dean	/Registrar			Title			

For more information, please email **visitingstudent@stjohns.edu** or call **1-888-9STJOHNS or 718-990-2000**.