



Thomas
Jefferson
University

Jefferson
College of
Graduate Studies

GRADUATE NON-DEGREE DATA FORM

- Non-refundable initial enrollment fee of \$10 must be submitted with this form.
- Official undergraduate academic transcripts may also be required.

Jefferson College of Graduate Studies

1020 Locust Street, M-60
Philadelphia, PA 19107-6799
Phone: (215) 503-4400
Fax: (215) 503-9920
E-Mail: jcgs-info@jefferson.edu
Web Address: www.jefferson.edu/jcgs

Starting Semester:

- Fall (Sep)
 Spring I (Jan)
 Spring II (Mar)
 Summer (Jun)

Educational/Career Objective:

- Intend to Matriculate in:
_____ Program
 Professional Enhancement
 Non-Degree Enrollment only

Name (Last, First, Middle Initial)			Male <input type="checkbox"/>	Social Security Number (Opt)
			Female <input type="checkbox"/>	
Other (Last, Family, or Surname that may appear on supporting documents)			Date of Birth (mo/day/year)	
Mailing Address (Street)				
City			State	Zip
			Phone Number (with Area Code)	
Permanent Legal Address (Street)				
City			State	Zip
			Phone Number (with Area Code)	
Employer (If TJU, list Department)			Work Phone Number	
E-Mail Address				
Citizenship (Country)			Visa Type (If not US citizen)	

Response to this question is *optional* and is requested by the College in order to comply with statistical reporting to educational and regulatory agencies and with its responsibilities under federal and state laws dealing with affirmative action and equal opportunity:

- American Indian or Alaskan Native Asian Caucasian Other
 Asian-American (Pacific Islander, Philippines, Guam) African-American Hispanic

Previous Colleges Attended:	Campus/Location	Attendance From	To	Field of Concentration	Degree Granted or Expected

Test Scores, if available (i.e. GRE, MCAT). Please indicate month and year that test was taken.

I certify that the information on this form is accurate.

Signature

Date