

**APPLICATION FOR
 GRADUATE NONDEGREE READMISSION**

Students who previously attended The University of Montana in a graduate nondegree status and have been gone from school for two years (24 months) or more, use this form to reapply for the same status. A **\$20 application fee**, payable to The University of Montana, must accompany this form.

Students whose only previous enrollment has been in continuing education courses must use the standard graduate nondegree application to apply.

Pre-Registration Immunization Requirement Form - Students readmitted after a 24-month absence must complete and submit to the Curry Health Center a Pre-Registration Immunization Requirement Form before registration can be permitted.

Name (Last or Family/Surname, First, Middle, Other Name(s))		U.S. Social Security No./Student ID No.		Date of Application
Present Mailing Address No. & Street		City	State/Country	Zip/Postal Code
Area Code/Phone No.				
Permanent Mailing Address No. & Street		City	State/Country	Zip/Postal Code
Area Code/Phone No.				
E-Mail Address			Date of Birth (mo/day/yr)	
Status Reapplying for: Graduate Nondegree	Objective (designate one):			Term & Year Expected to Enter:
	<input type="checkbox"/> For teacher certification <input type="checkbox"/> For transfer to another institution <input type="checkbox"/> For personal/professional development <input type="checkbox"/> To prepare for a graduate degree program in _____ <input type="checkbox"/> Other _____ _____			
Fall _____		Spring _____		
Summer _____				

(Applicant Must Complete Reverse Side)

*****FOR GRADUATE SCHOOL OFFICE USE ONLY*****

Admission Term : Autumn _____ Spring _____ Summer _____

Application Fee Paid _____

Resident/Non-Resident (determined by Graduate School) _____

Financial Statement (International Students) _____

Graduate School Notes:

If you are not a U.S. citizen, are you a "Lawful Permanent Resident" of the U.S.? Yes No If yes, please provide a photocopy of your Alien Registration Receipt Card or "Green Card"

Were you in the armed services? Yes No If yes, dates and locale of active duty: _____

Have you ever lived in Montana? Yes No If yes, most recent uninterrupted period (from) _____ (to) _____

Of what state are you a resident? _____

If you claim Montana residency, complete the appropriate column information below

<p>If your parents claim you as a federal tax exemption, answer the following:</p> <p>Father's Name _____ Mailing Address _____ Area Code/Phone No. _____</p> <p>Mother's Name _____ Mailing Address _____ Area Code/Phone No. _____</p> <ul style="list-style-type: none"> • When did your parent's (s') Montana residency begin? _____ • Where and when did they last file a state income tax return? _____ • Where and when did they last vote? _____ • What is their employment status (full-time, part-time, retired)? _____ • Occupation(s)? _____ • Employer(s)? _____ • Date present employment began? _____ 	<p>If your parents do not claim you as a federal tax exemption, answer the following:</p> <ul style="list-style-type: none"> • When did your residency in Montana begin? _____ • Where and when did you last file state income tax returns? _____ • Have you been continuously present in Montana for the past 12 months? Yes <input type="checkbox"/> No <input type="checkbox"/> explain _____ • Where and when did you last vote? _____ • From what state is your driver's license and date issued? _____ • In what state is your motor vehicle registered and the current license date? _____ • If you are married, what is your spouse's employment status (full-time, part-time, retired)? _____ • Spouse's employer and date employment began: _____
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If you were previously declared a non-resident and now believe you qualify for in-state status, you should also complete a Residency Questionnaire packet (available from the Graduate School) and submit it (including documentation) along with this application.

INTERNATIONAL APPLICANTS

BE SURE TO COMPLETE ALL APPLICABLE SECTIONS

Name and relationship of each dependent coming to the United States with you: _____

Spouse's name, complete mailing address and phone number: _____

If you are now in the United States, indicate non-immigrant visa type and expiration date: _____

Language Preparation	Financial Information
Which evidence of English proficiency do you wish to present? _____	Funds available from savings \$ _____
What language is spoken in your home? _____	Committed by family or friends \$ _____
How many years of formal instruction in English have you completed? _____	Committed by your government \$ _____
At what educational level was that instruction? _____	Other funding resources (please designate) _____

Have you ever been subject to discipline, suspension or probation at any institution of post-secondary education for reasons not related to academic performance? Yes No If yes, at what institution? _____

Have you ever been convicted of a criminal offense involving physical injury to persons or property or otherwise institutionalized for conduct causing physical injury to persons or property? Yes No If yes, explain _____

<p>I certify that the information in this application is true and complete to the best of my knowledge and I understand that inaccurate information may affect my admission, enrollment, and/or financial aid status.</p>	<p style="text-align: center;">Applicant's Full Legal Signature</p>
	<p style="text-align: center;">Date</p>