Students in the General College Division are not candidates for Lehigh degrees. They are admitted to courses at or below the 300 level for which they have met the prerequisites noted in the catalog and/or for which they have received the approval of the departments offering the courses. Credits earned in courses taken in the General College Division may not be submitted to meet the requirements for a graduate degree. You may not audit a course without permission from the Committee on the Standing of Students. 400 level courses may not be taken through the General College Division.

Because the General College Division does not lead to a Lehigh degree, students enrolled in the program are not eligible for Financial Aid.

APPLICATION INSTRUCTIONS:

1. Complete and return this application to the Office of Admissions NO LATER THAN ONE MONTH PRIOR TO THE DATE OF REGISTRATION for a given semester. Enclose a non-refundable application fee of $70. Make check payable to Lehigh University.

2. Please have your secondary school transcript and official transcripts from all colleges or universities you have attended sent to the Office of Admissions.

3. You are required to obtain permission to enroll in a course from the professor(s) who teach the course(s) you wish to take (an approval letter form is enclosed). Have the notes of permission sent to the Office of Admissions. Your application will be considered incomplete until we receive faculty permission for you to take the course(s) you request.

4. In the space below explain why you wish to enter Lehigh University.

ALL COMMUNICATIONS, INCLUDING TRANSCRIPTS, SHOULD BE ADDRESSED TO THE GENERAL COLLEGE DIVISION, OFFICE OF ADMISSIONS, ALUMNI MEMORIAL BUILDING, 27 MEMORIAL DRIVE WEST, BETHLEHEM, PA 18015

(OVER PLEASE)
LEHIGH UNIVERSITY GENERAL COLLEGE DIVISION APPLICATION

Date you wish to enter Lehigh ___________ SOCIAL SECURITY NUMBER: ________________________________

(mo/yr)

Have you previously applied to Lehigh University? Yes ____ No ____ If so, when?________________________

SEX: M F

LAST NAME    FIRST NAME    M.I. (or maiden name)

Date of Birth: ____________________________

ADDRESS: __________________________________________

TELEPHONE: (H) ____________________________

(W) ____________________________

E-Mail Address: ____________________________

CITIZENSHIP: (Circle One) U.S. -- PERMANENT RESIDENT U.S. -- OTHER __________ VISA__________

What is your first language, if other than English? ______________ Number of years studying English: __________

Have you served in the Armed Forces of the U.S.A.? Yes ____ No _____ If yes, give inclusive dates, branch, highest
rank and theater: ____________________________

Names of Lehigh Relatives (specify relationship) ____________________________________________

Are you a Lehigh employee? ______ If yes, which department? ________________ Campus Phone: ________

IN WHICH COURSE(S) DO YOU WISH TO ENROLL AT LEHIGH: ____________________________

Is it your intention in the future to become a degree-seeking student at Lehigh University? __________________

Please explain why you wish to enter Lehigh University (use space on reverse or attach a separate sheet).

List below the secondary schools, colleges and universities you have attended. Failure to report all academic experience constitutes suppression of record and renders a student ineligible for admission and subject to disciplinary action.

<table>
<thead>
<tr>
<th>SCHOOL/COLLEGE NAME</th>
<th>LOCATION</th>
<th>DATES OF ATTENDANCE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>ENTERED:</td>
</tr>
<tr>
<td>1)</td>
<td></td>
<td>1)</td>
</tr>
<tr>
<td>2)</td>
<td></td>
<td>2)</td>
</tr>
<tr>
<td>3)</td>
<td></td>
<td>3)</td>
</tr>
</tbody>
</table>

I certify that the information provided on this application is complete and correct to the best of my knowledge and that I have read and understand the information included on the reverse side of this application.

Signature of candidate:  ........................................................................................................ Date: ..............................................