



# Continuing Studies Application for Admission

## Return all application materials to:

College of Saint Elizabeth  
Attn: Adult Programs Admissions  
2 Convent Road  
Morristown, NJ 07960-6989

## Adult Undergraduate Degrees and Certificate Programs

**Name:** \_\_\_\_\_

Please indicate your program of interest and specialization (if applicable):

### Baccalaureate degrees available to Continuing Studies students:

#### **Bachelor of Arts Programs**

##### ***(Evening/Weekend Coeducational Programs)***

- Computer Information Systems
- Justice Studies
- Psychology
- Theology

#### **Bachelor of Arts Programs**

##### ***(Day Programs for Women Only)***

- American Studies
- Applied Science
- Art
- Biology
- Chemistry
- Education
- English
- Global Studies
- History
- Justice Studies
- Mathematics
- Music
- Philosophy
- Psychology
- Sociology
- Spanish
- Theology

#### **Bachelor of Science Programs**

##### ***(Evening/Weekend Coeducational Programs)***

- Business Administration
- Computer Science
- Foods and Nutrition
- Nursing (RN to BSN completion program)

#### **Bachelor of Science Programs**

##### ***(Day Programs for Women Only)***

- Biochemistry
- Biology
- Business Administration
- Chemistry
- Computer Science
- Foods and Nutrition

#### **Certificate Programs**

##### ***(All certificate programs are coeducational, evening/weekend programs.)***

- Dietetics Verification
- Gerontology
- Victim Services

#### **Other Options**

- Visiting Student

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Please complete this application (type or print legibly) and return it with the **\$35<sup>†</sup> non-refundable application fee** to:  
College of Saint Elizabeth, Attn: Adult Programs Admissions, 2 Convent Road, Morristown, NJ 07960-6989.

Prospective undergraduate students must forward official transcripts from all previous post-secondary institutions to the College of Saint Elizabeth.

## 1. Personal Data

Name: \_\_\_\_\_  
Last First Middle Former Last Name (one only)

Social Security Number: \_\_\_\_\_ Gender\*: Male \_\_\_\_\_ Female \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Number Street Apt.

City County State Zip

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
City State County

Veteran of U.S. Armed Forces

Citizenship:  U.S. Citizen  Other (answer below please)/Country of Citizenship: \_\_\_\_\_

Permanent Resident? ID#: \_\_\_\_\_

International Student-Visa Status? Type of Visa: \_\_\_\_\_

Visa Number: \_\_\_\_\_

How did you learn about the College of Saint Elizabeth? (please be specific, if applicable)

- Co-worker/relative/friend who attends the College
- Open House
- I am a CSE Alumna/us
- Radio Advertisement Station: \_\_\_\_\_
- Newspaper Advertisement: \_\_\_\_\_
- Outdoor Advertisement Location: \_\_\_\_\_
- Other: \_\_\_\_\_
- College Website
- Direct Mail Piece

## 2. Additional Data (optional)

a. Racial/Ethnic Status\* (check all of the following that apply to you):

- American Indian
- Asian Pacific Islands
- Black Non-Hispanic
- Hispanic
- Nonresident Alien
- Other
- Race/Ethnicity Unknown
- White Non-Hispanic

b. Religious preference\* (check all of the following that apply to you):

- East Rite Catholic
- Islam
- No Affiliation
- Other
- Roman Catholic
- Hindu
- Jewish
- No Response
- Protestant

\* This information is required in order to comply with New Jersey and U.S. Dept. of Education reporting procedures. It does not serve as a basis for admission.

<sup>†</sup>This fee is subject to change.

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## 3. Academic Plans and History

Date of intended enrollment:  Fall  Spring  Summer 1  Summer 2  Summer 3  Intersession  Calendar Year: \_\_\_\_\_

Do you have previous college credits?:  Yes  No

Do you plan to attend:  Full-time (12 or more credits/semester)  Part-time (fewer than 12 credits)

This application is for:  Matriculated status (to earn an undergraduate degree)  
 Non-matriculated status (certificate or visiting)

Have you ever applied to the College of Saint Elizabeth?  Yes  No If yes, did you attend?  Yes  No

High School where you received diploma:	Location City, State	Graduation Month/Year

List, in chronological order, **ALL** colleges, professional schools or universities you have attended.

Institution	City, State	Dates of Attendance	Diploma/Degree	Date Conferred

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## 4. Professional History

Please list all relevant professional work experiences, beginning with the most recent (you may attach resumé).

Employer	City, State	Position/Title	Dates of Employment

## 5. All Applicants

Return all application materials, along with the **non-refundable \$35<sup>†</sup> application fee** made payable to: *College of Saint Elizabeth*.

All new students are required to meet with an advisor prior to registering. Appointments may be made with an advisor by calling (973) 290-4600.

I certify that the information I have given is true to the best of my knowledge.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>†</sup>This fee is subject to change.

<b>For Office Use Only:</b> Application fee paid <input type="checkbox"/> Date: _____    Initials _____
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**Federal Compliances**

The College of Saint Elizabeth does not discriminate on the basis of sex, physical handicap, race, age, color and national, or ethnic origin, in the administration of its admissions, educational policies, scholarship and loan programs, or other college policies including employment.

The College of Saint Elizabeth has filed compliance with The Department of Health, Education, and Welfare under Title VI-Civil Rights Act of 1964; Title IX, Education Amendment of 1972 and Section 504 of the Rehabilitation Act of 1973, as amended.



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