



SPRINGFIELD COLLEGE  
Office of the Registrar

Nonmatriculated Graduate Student Data Form

To become a candidate for a graduate degree, a formal application for admission must be filed with the Office of Graduate Admissions. Registration as a nonmatriculated student does not imply acceptance into a graduate degree program.

Name: \_\_\_\_\_  
Last First Middle

Male \_\_\_ Female \_\_\_ U.S. Citizen \_\_\_ Yes \_\_\_ No Permanent Resident \_\_\_ Yes \_\_\_ No

Mailing Address: \_\_\_\_\_  
Street City State Zip Code

email: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Phone: \_\_\_\_\_  
Home Business Phone

Undergraduate Degree Institution \_\_\_\_\_

Type of Degree: \_\_\_\_\_ Date Received: \_\_\_\_\_ Major: \_\_\_\_\_

Other Colleges Attended (list schools, degree earned and attendance dates):

Institution	Degree Earned	Dates of Attendance
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Springfield College retains the right to request official transcripts*

Are you intending to apply to a graduate degree program at Springfield College?

Yes/No \_\_\_\_\_ If yes, please indicate the degree program \_\_\_\_\_

Are you taking courses toward educator certification/licensure? \_\_\_ Yes \_\_\_ No

If yes, in what area? \_\_\_\_\_

Do you need a supervised practicum? Yes \_\_\_ No

Are you taking courses to fulfill other (noneducator) certification requirements?

Yes/No \_\_\_ If yes, in what area? \_\_\_\_\_

My signature below testifies that all information given above is correct and that I understand that as a nonmatriculated graduate student at Springfield College I am subject to all the regulations of the College. I am aware that I am not eligible for federal financial aid as a nonmatriculated student. Furthermore, I am aware of and understand the following graduate regulation: no more than twelve semester hours of credit taken as a nonmatriculated student at Springfield College prior to admission to graduate study may be applied to the Master's degree or to the Certificate of Advanced Graduate Study.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Assistant Vice President for Academic Affairs

\_\_\_\_\_  
Date