



Non-Degree Credit Studies Application

Please Type or Print Clearly

This Form Must Be On File To Register

Check Program & Semester: MRT MST Bilingual ESL Fall Term Summer Term
 MMT MTT Gifted & Talented Spring Term

PERSONAL INFORMATION

Legal Name _____
Last First Middle Social Security Number

Mailing Address _____
(Permanent) Number and Street Apt. # City State Zip

Telephone _____ Birth date _____ Sex: Male Female
(Permanent) area code month day year

School District and Address _____ Telephone _____
e-mail address _____ FAX number _____

PLEASE COMPLETE ALL REQUESTED INFORMATION

If you are not a U.S. citizen, are you currently living in the United States? Yes No If yes, please complete the following:
If you are a Permanent Resident, please state your alien card identification A _____
If you are a Non-Immigrant, please state your visa status _____ Country of Citizenship: _____
 Married Single Religious Preference: _____

Ethnic Description (optional)

1. Are you of Hispanic origin? Yes (If yes, question 2 is optional.) No (If no, you must answer question 2.)
2. Do you identify with one or more of the following ? (More than one may be selected.)
 Black/African American American Indian/Alaska Native Asian Native Hawaiian/Pacific Islander White

Ethnic category explanations can be found on the Web at <http://smu.edu.registrar/ethnicity.asp>

FOR ANYONE WHO HAS APPLIED TO OR ATTENDED SMU PREVIOUSLY

List semester _____ and year _____ of application Were you: Accepted or Rejected
List semester _____ and year _____ of ENTRY and semester _____ and year _____ of LAST attendance

Did you enter SMU from a: _____ Public High School or _____ Private High School
(Check one) _____ Texas Junior College or _____ Out-of-State Junior College
_____ Texas Senior College or _____ Out-of-State Senior College
_____ Other

From which School of SMU were you last registered? (Check one school below)

Dedman I Cox School of Business School of Education & Human Development
 Dedman II Meadows School of the Arts Engineering & Applied Science Special Studies (Non-degree)

FOR ALL APPLICANTS:

Name of Last School Attended _____
Location From (Semester/year) To (Semester/Year) Degree Earned

An academic transcript showing your degree and a copy of your State of Texas Teaching Certificate must be sent with application for all programs.

Distribute three (3) recommendation forms and ask that they be sent directly to the School of Education & Human Development, P. O. Box 750455, Dallas, TX 75275. Select respondents who can attest to your academic ability, your teaching abilities, and your personal qualities. One recommendation must be from your principal or other supervisor.

My signature below indicates that all the information contained in my application is factually correct and honestly presented and that I am eligible to return to the last school attended.

Student's Signature _____ Date _____

Attach a \$75 check or money order payable to Southern Methodist University. This fee is non-refundable.

APPLICATION PROCEDURES

DOMESTIC AND INTERNATIONAL APPLICATION QUESTIONS

Criminal History

1. Are you currently under indictment for any crime? Yes _____ No _____
2. Have you ever been convicted of, pleaded guilty to, or received deferred adjudication for any felony, state jail felony, or Class A misdemeanor? Yes _____ No _____
3. Have you ever received or are you currently on probation? Yes _____ No _____

INTERNATIONAL APPLICANTS ONLY SHOULD ANSWER NUMBER 4 in addition to 1-3

4. If the questions above are not applicable to you as an international applicant, list and explain any criminal charges that have been brought against you at any time and in any place. Explain the outcome of these charges. Minor traffic violations and parking tickets need not be included.

(Disclosure in the affirmative will not necessarily result in rejection of an applicant for admission. Failure to disclose such a record, if it exists, and to explain that record honestly, however, will subject a student to the University's judicial process and may result in dismissal from the University. Failure to explain an affirmative response to this question will result in the Application's not being further processed.)

Submit the completed Application, required academic transcript(s), copy of teaching certificate, copy of teaching service record, recommendation, and application fee to P. O. Box 750455, Dallas, TX 75275.

Statement

I have at least a 3.0 (scale of 4.0) cumulative grade-point average at the last school or college I attended and I am currently in good academic standing at that school. I understand that I am obligated to furnish SMU with official transcripts from my college during the first semester of my enrollment. If my academic records do not confirm my good standing, I am ineligible for admission and may be withdrawn from my current classes. My signature below indicates that all the information contained in my application is factually correct and honestly presented, and that I understand the conditions of my status as a non-degree student.

Signature _____

Date _____

MAIL TO: School of Education & Human Development, P. O. Box 750381, Dallas, Texas 75275.

Southern Methodist University will not discriminate in any employment practice, education program, or educational activity on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. SMU's commitment to equal opportunity includes nondiscrimination on the basis of sexual orientation. The Director of Affirmative Action has been designated to handle inquiries regarding the nondiscrimination policies and may be contacted at Southern Methodist University, Dallas TX 75275, 214-768-3601.

**School of Education & Human Development
Southern Methodist University**

RECOMMENDATION FORM

To the applicant:

Please print or type the name and address of the individual you are asking to complete this form and your name and address in the appropriate spaces below. Sign the form and send it to your reference, enclosing a stamped envelope addressed to the School of Education & Human Development, P. O. Box 750381, Southern Methodist University, Dallas, TX 75275. (A total of three (3) recommendations are required. A recommendation from your principal or other supervisor is required. If you have been enrolled in an SMU credit class in the last five years, one recommendation must be from the course professor.)

Check Program: ___MRT ___ MST ___ MMT ___ MTT ___ ESL ___ Gifted & Talented ___ Bilingual

Name of reference _____

Applicant's name in full _____

Applicant's present address _____

Under Section 438 of the General Education Provisions Act (20 U.S.C. 1232g), if you are accepted and enrolled as a student at Southern Methodist University, you have the right to inspect your admission file. However, the Act provides that the student may waive the right of access to confidential recommendations. If you wish to waive the right of access to the recommendation being submitted on this form, please sign your full name on the following line.

Applicant's signature _____ Date _____

To the individual completing this form: If you prefer to write a separate letter of reference, please address the questions below in your letter. Thank you.

1. How long and in what capacity have you known the applicant?

2. Please give your assessment of the applicant's academic preparation and of his/her industry, motivation, and capacity for demanding academic work.

3. Describe the applicant's work as a teacher (professionalism, ability to motivate students, skill at making subject matter relevant, etc.).

4. Do you know anything that might detrimentally affect the applicant's academic or professional performance?

5. Please give any other information concerning the applicant that you think would be useful to the admitting department. (Use additional sheets if necessary).

6. Using the chart below, please give us your appraisal of the applicant relative to others you have known in a similar capacity.

	Exceptional (top 2%)	Outstanding (top 5%)	Excellent (top 15%)	Good (top 1/3)	Average (mid1/3)	Below Average (bottom 1/3)	Not Observed
Intellectual Ability							
Maturity							
Motivation							
Ability to work with others							
Creativity and Imagination							
Self-Confidence							
Leadership Potential							
Ability to analyze a problem and formulate a solution							
Oral Communication Skills							
Written Communication Skills							

Overall Rating: ___strongly recommend ___recommend ___recommend with reservations ___do not recommend

Signature _____ Date _____

Name _____

(please print or type)

Title _____ Employer _____

Business Address _____

Telephone(_____) _____ Fax(_____) _____ e-mail _____