

Non-Degree Seeking Application

Courses Only Available Summer Semester

This application is for students wishing to take preliminary coursework with LCN or those NOT wishing to pursue a degree with LCN. ****Official transcript(s) in sealed envelopes showing proof of prerequisite requirements is required along with this application in order to enroll. Complete and return this form and official transcripts to: 217-709-0953 (Fax), 903 N. Logan Ave., Danville, IL 61832 (mail), or cyoung@lcn.edu (email).**

Part I: Admission Status

- Year for which you are seeking non-degree enrollment: **Summer Semester** of (Year) _____.
- Which course(s) are you seeking to enroll?
 CHEMISTRY I (C 114) - Danville Campus (Prerequisite: One year of secondary school algebra or college-level equivalent.)
 CHEMISTRY II (C 115) - Danville Campus (Prerequisite: One year of secondary school algebra or college-level equivalent.)
 STATISTICS (STAT 320) - Danville Campus (Prerequisite: One year of secondary school algebra or college-level equivalent.)

Part II: Personal Information

Under requirements of the U.S. Office of Education, Department of Health, Education and Welfare, information on age, race and gender must be collected and reported by collegiate institutions. This information is not used in the admission decision.

- What is your full legal name _____
 (Last) (First) (Middle) (Maiden)
- Other preferred first name: _____
- List any other name(s) by which your records may be found: _____
- Gender: Male Female
- Are you Hispanic/Latino Yes No
- If other than Hispanic/Latino, please indicate your ethnicity: (Please check all that apply)
 American Indian or Alaskan Native Asian Black/African American
 Native Hawaiian or Other Pacific Islander Non-resident Alien Race & Ethnicity Unknown
 White If Other, please indicate: _____
- Social Security # _____ Birth Date _____
- Are you a U.S. Citizen Yes No

Lakeview College of Nursing requires that all students be either U.S. Citizens or Permanent U.S. residents in order to qualify for admission. If you are not a U.S. Citizen you will be asked to provide one of the following: Naturalization Certificate or Green Card.

- Have you lived within the state of Illinois for at least 12 continuous months prior to enrolling at LCN? Yes No
- E-mail address _____
This e-mail address will be used in confirming your registration.
- Current Mailing Address _____
 City: _____ State: _____ Zip: _____
- What is your cell phone number (_____) _____ Home phone number (_____) _____
- Emergency contact _____ Relationship _____
 What is their phone number (_____) _____ Alt. phone number (_____) _____

I hereby certify that to the best of my knowledge the information furnished in this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for rejection or dismissal. I also understand that in signing this application I acknowledge that I have read, understand, and will adhere to the College's policies that can be found within the college catalog/student handbook at <https://www.lcn.edu/cataloghandbook>.

Signature: _____

Date: _____