

Non-Degree Seeking Application

Courses Only Available Summer Semester | Application Deadline - April 1

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@lakeviewcol.edu (email).**

Part I: Admission Status

1. Semester for which you are seeking non-degree enrollment: Semester _____ Year _____
(Fall, Spring, or Summer)

2. 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.

3. What is your full legal name _____
(Last) (First) (Middle) (Maiden)

4. Other preferred first name: _____

5. List any other name(s) by which your records may be found: _____

6. Gender: _____ Male _____ Female

7. Are you Hispanic/Latino _____ Yes _____ No

8. 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: _____

9. Social Security # _____ Birth Date _____

10. 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.

11. Have you lived within the state of Illinois for at least 12 continuous months prior to enrolling at LCN? _____ Yes _____ No

12. E-mail address _____

This e-mail address will be used in confirming your registration.

13. Current Mailing Address _____

City: _____ State: _____ Zip: _____

14. What is your cell phone number (_____) _____ Home phone number (_____) _____

15. 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.lakeviewcol.edu/cataloghandbook>.

Signature: _____

Date: _____