

## 1-888-4LANDER admissions@lander.edu www.lander.edu

## **UNDERGRADUATE ADMISSION**

The Update Application for Admission should be completed by those students who have applied for undergraduate admission to Lander within the last year, but did not enroll. This form will be used to update your initial application for admission; there is NO additional application fee required. If you have attended another college or university since your initial application, please submit transcripts from each college attended and a transfer certification form from the last college attended. (Transfer certification forms may be obtained from the Office of Admissions.)

## **GRADUATE ADMISSION**

The Update Application for Admission is also designed for those students who have previously completed a degree-seeking Application for Graduate Admission through the Office of Admissions, but have had an attendance break of one or more regular semesters.

am applying as: (check one)				
☐ Undergraduate, degree	e-seeking student majoring in	1		
☐ Undergraduate, non-de	egree student			
☐ Graduate, degree-seek	ing student majoring in			
IPDATE INFORMATION				
Social Security Number		Birth Date		
Name	FIRST			
LASI	FIRST		MIDDLE INITIAL/MAIDEN NAME	
Mailing address	РО В	OX/STREET		
CITY	STATE	ZIP CODE	COUNTY	
Daytime telephone number		Home telephone number		
E-mail address				
Emergency contact			TELEPHONE NUMBER	
Colleges attended since original applic				
COLLEGE		BEGINNING AND ENDING DATES		
COLLEGE		BEGINNING AND ENDING DATES		
COLLEGE		BEGIN	NNING AND ENDING DATES	
Expected date of entrance	Fall	□ Spring	☐ Summer	

<b>RESIDENCY</b> How long have you lived in South Carolina? Years	Months	State of previous reside	ncy
List all addresses where you have lived for more than 30 days ADDRESS (Begin with most current address)	s during the past 48 mo CITY/STATE	onths.	DATES
List below the name of your employer(s) for the past two year od and attach additional pages if necessary.)	rs beginning with the m	nost recent. (Please account	for all time during this peri
Name of employer			
Dates of employment			☐ part-time
City and State			
Name of employer			
Dates of employment		🗖 full-time	☐ part-time
City and state			
Were you claimed as a dependent or exemption by your parenter return? ☐ yes ☐ no	nt(s), guardian(s), or ot	her person(s) on their most	recent federal income tax
Name of person who claimed you			
Relationship to you			
This person's address for the past two years			
This person's place(s) of employment for the past two years:			
Name of employer		Dates of employment	
City and state			☐ part-time
CERTIFICATION AND SIGNATURE  I certify that all information provided in this application is condance is cause for immediate cancellation of registration at Lational information from my previous colleges or schools, and it	ander). I further under	stand that Lander may find	it necessary to request addi-

SIGNATURE DATE

It is the policy of Lander University to provide equal educational and employment opportunity to all present and future employees and students regardless of race, color, religion, sex, national origin, age, or disability. Lander University is an affirmative action/equal opportunity employer.