

Last Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

**COLLEGE OF CHARLESTON  
SUMMER VISITING STUDENT APPLICATION**

**CURRENTLY ENROLLED COLLEGE OF CHARLESTON STUDENTS  
SHOULD NOT USE THIS FORM**

New students planning to attend the College of Charleston for the fall semester should contact the Academic Advising Center at (843) 953-5981 before filling out this form.

**This form must be submitted with Registration Form, registration payment, and tuition**

1. Social security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2. Semester applying for: \_\_\_\_\_  
Year  
\_\_\_ Maymester \_\_\_ May Evening \_\_\_ Summer I Day \_\_\_ Summer Evening \_\_\_ Summer II Day

3. Name: \_\_\_\_\_  
Last First Middle (Any other name on record)

4. Local address: \_\_\_\_\_  
Street City State Zip

Permanent address: \_\_\_\_\_  
Street City State Zip

Billing address: \_\_\_\_\_  
Street City State Zip

5. Home phone: (\_\_\_\_) \_\_\_\_\_ Work phone(\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

This following information is used for statistical purposes only:

6. Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_ F \_\_\_ M

7. Marital status: \_\_\_ Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed

8. Race/Ethnicity: \_\_\_ African American \_\_\_ Asian/Pacific Islander  
\_\_\_ Hispanic \_\_\_ Native American \_\_\_ Caucasian \_\_\_ Other \_\_\_ No response

9. South Carolina current county of residence: \_\_\_\_\_

10. Are you a legal resident of the state of South Carolina for tuition purposes?

\_\_\_ Yes \_\_\_ No \_\_\_ Uncertain\*

*\*If you check uncertain please contact the Legal Residency Office at (843) 953-7312 or via email at [legalresidency@cofc.edu](mailto:legalresidency@cofc.edu).*

Do both parents reside in South Carolina? \_\_\_ Yes \_\_\_ No

How long have you resided in South Carolina? Year(s): \_\_\_\_\_ Months: \_\_\_\_\_

Do you have a South Carolina Driver's License? \_\_\_ Yes \_\_\_ No \_\_\_\_\_ Issue Date

Country of citizenship: \_\_\_\_\_

Visa type (International student): \_\_\_\_\_

Non-U.S. permanent resident (List alien registration number): \_\_\_\_\_

11. Person to contact in case of emergency: \_\_\_\_\_

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

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

12. Check the one that best describes your application:

High school student  Visiting student  Auditing student  Senior citizen

13. Have you ever applied to the College of Charleston?

No  Yes If yes, when? \_\_\_\_\_

Have you ever attended the College of Charleston?

No  Yes If yes, when? \_\_\_\_\_

14. Have you been denied admission to the C of C for the upcoming fall semester?

No  Yes

15. High school: \_\_\_\_\_

Name of school City State

Dates of attendance: \_\_\_\_\_ to \_\_\_\_\_  
Month/Year Month/Year

High school graduate?  Yes  No  GED \_\_\_\_\_  
Month/Year

16. College you are currently attending or most recently attended:

A. \_\_\_\_\_  
Name of College City State

Dates of attendance: \_\_\_\_\_ to \_\_\_\_\_

B. Are you eligible to return?  Yes  No GPA \_\_\_\_\_

17. How did you hear about College of Charleston's Summer School?

(Check all that apply)

Radio  Friend or relative  CofC postcard  Internet  TV  Brochure

Newspaper Which one? \_\_\_\_\_

College newspaper Which one? \_\_\_\_\_

Other: Be specific \_\_\_\_\_

*I certify that all information provided on this application is complete and correct to the best of my knowledge, and I understand that any false information and/or omission of previous college attendance is cause for immediate cancellation of registration at the College of Charleston.*

**Declaration of Citizenship or Legal Presence in the United States**

The South Carolina Illegal Immigration Reform Act (S. C. Code Ann. §59-101-430 (Westlaw 2008)) prohibits those unlawfully present in the United States from attending a public institution of higher education in South Carolina and from receiving a public higher education benefit. By signing this application, you attest that you are a US citizen, a legal permanent resident in the United States, or an alien lawfully present in the United States. In addition, the college may require you to submit documentation that supports your claim. Any student providing false information may be subject to dismissal from the college. Any student who is found to be unlawfully present in the United States will be dismissed from the college.

**Student's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**College of Charleston Summer School Tuition Policy:**

Students who register for a Summer School class are financially obligated for that class unless they drop during the drop/add period or withdraw during the official, published tuition refund period. Registered students who fail to attend will be assessed a nonrefundable \$250 fee per course for failure to officially drop/withdraw from a course.

**Student's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please print out this form. Be sure to sign and date the form. Incomplete and/or unsigned application and registration forms will be returned to the student. Send **this form** along with the **registration form** indicating which courses you have chosen and **a check for the full tuition and fees** to:

**Summer Registration  
Registrar's Office  
College of Charleston  
66 George Street  
Charleston, SC 29424-0001**

**Phone: (843) 953-4831  
Fax: (843) 953-7371**

**Credit card payments are NOT accepted with mail-in application and registration forms.**

**For tuition and fee information:**

Follow the Tuition and Fees link on the Office of Summer Sessions web page (<http://summer.cofc.edu>).