

WHO IS A VISITING STUDENT?

- Undergraduate students who are matriculated at another college and wish to take courses at SUNY New Paltz during the regular academic year are considered visiting students.
- Visiting students remain matriculated at their home institution and are considered nonmatriculated students at SUNY New Paltz.
- Visiting students may take courses upon availability and sometimes require <u>permission by</u> <u>specific departments to enroll</u>.
- Visiting students are prohibited from enrolling in internship, fieldwork, or practicum courses.
- Visiting students may take up to one academic year of courses at SUNY New Paltz.

GENERAL VISITING STUDENT CRITERIA

- You must have a minimum of a 2.0 GPA at your home institution for consideration.
- You must not be on academic probation, academic warning or academic suspension at your home institution.
- You must not be on disciplinary probation or suspension at your home institution.

TO APPLY

- Complete Visiting Student Application below
- Only submit a complete application with home campus advisor approval and transcript
- Submit the application to Records & Registration by email or US mail

REQUIRED APPLICATION DOCUMENTATION

- Your application must be signed by your advisor (from your home institution) indicating approval of all courses your wish to enroll in at SUNY New Paltz and providing signed proof of your good academic and disciplinary standing.
- Submit an unofficial or official transcript from your home institution.

APPLICATION AND REQUIREMENT DOCUMENTS DUE DATE(S)

- Fall and Spring The complete application must be received and approved prior to the date for non-matriculated and visiting students as noted in the Academic Calendar.
- Winter and Summer Sessions SUNY New Paltz does not process visiting student applications for the summer or winter sessions as these sessions are open to the general public, providing certain basic requirements and course prerequisites are met.

SUNY New Paltz reserves the right to change application due dates without notice.

International students will be notified of the admission decision and our advisors will then assist you in facilitating your application for your F1 visa.

Contact intadmissions@newpaltz.edu with any questions or concerns.



Center for International Programs 1 Hawk Drive, Van den berg Hall

New Paltz, NY 12561-2439

INTERNATIONAL UNDERGRADUATE VISITING STUDENT APPLICATION

intadmissions@newpaltz.edu

• Accepted visiting students will be registered for approved and available courses during the non-matriculated registration period.

 Students who are on "academic suspension or dismissal" or "disciplinary suspension or dismissal" are not eligible to apply for Visiting Student status.

PLEASE PRINT LEGIBLY

Name								
Last			MI					First
E-Mail address					Date	e of Birth ⊮	/ Ionth Day	
Your college address	Street/Apt. or o	lorm or P.O. Box and coll				Phone: ()	
	City		State		Zip	Co	untry	
Your home address	Street/Apt.					Phone: ()	
	City		State		Zip	Co	untry	
Are you a US citizen Optional: How would			v York state	resider	nt? □ Yes □] No		
			A					
White, non-HispanicAmerican Indian/Native Alask		 □ Black or Africar □ Asian 	n American		ve Hawaiian panic/Latino	or Uther Pa	CITIC ISIANDO	er
					Dominican South Americ Other Hispan		Puerto	
Have you previously	applied for m	natriculation to New	w Paltz? 🗌]Yes [Accepted Denied No		

Semester/Year I wish to visit
Fall 20_____
Spring 20_____
If you are applying for a full academic year, check both.

Summer and Winter sessions do not require a visiting student application.

Institution currently attending ____

Major area of study _

You must submit a transcript with this application (it can be an unofficial copy).

New Paltz courses you wish to take this semester

Any course prerequisites must be met in order to register for courses. See https://www.newpaltz.edu/classes/ for course listings

Signature of student's academic or departmental advisor at the home institution:

I have reviewed and approve of the proposed program of study for the visiting period. I agree with the student that work completed during the visiting period will be counted toward the degree at the home institution.

CRN	COURSE SEC. NO				COURSE TITLE	CR	М	т	w	R	F	TIME		
				 			TOTAL WORKLOAD DESIRED					-		

Advisor's Signature	

Advisor's Name (please print) _____

Title and Department _____

Institution _____

Signature of student:

I understand that my acceptance as a non-matriculated visiting student at New Paltz is dependent on space availability. I also understand that I am personally responsible for all tuition, fees and charges. I agree to be bound by all rules and regulations of the host college. I understand that any falsification or omission of data may result in a denial of admission or in dismissal from the College.

Applicant's Signature

Date ____ / ___ / ___ Year

____/___/____ Month Day Year

Date ____



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INTERNATIONAL VISITING STUDENT APPLICATION CHECKLIST

 \Box You have completed the entire application.

- □ You have attached an unofficial college transcript.
- ☐ You have met all New Paltz course prerequisites.
- ☐ You have met with your advisor and he/she has completed the advisor section of this application.

Email completed packet to **intadmissions@newpaltz.edu.** Please put "Visiting Student" in the subject line of the email.