

NORTHERN MARIANAS COLLEGE BUSINESS DEPARTMENT

P.O. Box 501250 CK, Saipan, MP 96950

Contact Phone/Email:

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PHOTO

UNDERGRADUATE APPLICATION FOR ADMISSION

| SEMESTER ENTERING (Select One (1) and indicate | | □ SPRIN | G 20 □ S | SUMMER 20 |
|---------------------------------------------------|-------------------------------------------------------------|---------------|--------------------------------------|------------------------|
| ADMIT STATUS: (Chec | ck one) | | | |
| ☐ Freshm | an Non-Degre | ee 🗆 Tra | ansfer-In | 3 rd . Year |
| EDUCATION GOAL: (| Check one) | | | |
| ☐ To prov | or's degree from NMC vide a foundation for my care Specify) | eer objective | ☐ Second Baccalau ☐ Transfer credits | |
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| Full Legal Name: | LAST | FIRST | MII | DDLE |
| Student PC #: | Date of Birth: | | Nationality: | |
| Mailing Address: | N 1 (G | | | 71.0.1 |
| | Number/Street | City | State | Zip Code |
| Contact Information: | Home | | rk | Cell |
| E-mail address(s): | | | | |
| • | rn Marianas College Gradua What Program and Date of | | | Yes |

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| INSTITUTION | | Numbe | | Title | Taken | Earned | Grade |
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APPLICANT'S SIGNATURE

DATE