

New Incoming First Year and Transfer Student Summer Sessions Request Form

Student Information

Student Name: _____

Which school will you attend in the fall semester? **Please select one option only.**

College MSB NHS SFS SFS-Q

Are you a conditional fall admit? Yes No Have you submitted your deposit for the fall semester? Yes No

Citizenship and Visa Status: **Please select one option only.**

- U.S. Citizen or Permanent Resident (no visa required)
- F-1 or J-1 visa sponsored by Georgetown University
- F-1 or J-1 visa not sponsored by Georgetown University
- Other: _____

Course Information

*Please list the full course number(s) for the course(s) you would like to take this summer. You may take up to two courses in one session. Please also list up to two alternate courses in the event your preferred course is unavailable.

	Session I Courses		Session II Courses
<i>Example:</i>	<i>PSYC-001-10</i>	<i>Example:</i>	<i>SOCI-001-20</i>
1 st Choice		1 st Choice	
2 nd Choice		2 nd Choice	
Alternate 1		Alternate 1	
Alternate 2		Alternate 2	

Student Summer Contact Information

Will you be submitting an on-campus housing application? Yes No

If you selected no, please provide your summer off-campus address:

Student Email: _____

Student Cell Phone Number: _____

Parent/Guardian Information:

Parent/Guardian Name: _____ Telephone Number: _____

Email Address: _____

2nd Parent/Guardian Name: _____ Telephone Number: _____

Email Address: _____

Please save a copy of this form and email a copy to Georgetown Summer Sessions at summer@georgetown.edu.

GU Official Use Only: Approved by School Dean Processed by Registrar Processed By Summer Sessions
