



GMS NON-DEGREE APPLICATION FORM

Semester:

Year:

Last Name:

First Name:

Middle Name:

BU ID#:

Email:

Date of Birth:

Legal Sex: Legal, binary sex is required for BU records and Federal Reporting

Country of Citizenship:

Street Name & Apt. Number:

City:

State:

Zip Code:

Country:

Home Phone:

Cell Phone:

Work Phone:

BU Emergency Alert Contact Phone: **Name of Emergency Contact:**

Relationship:

Phone Number:

Previous Degree

College/University:

Graduation Date:

PLEASE SUBMIT THE FOLLOWING DOCUMENTS

1. SUBMIT SIGNED NON-DEGREE APPLICATION ALONG WITH GMS REGISTRATION FORM
2. **OFFICIAL UNDERGRADUATE DEGREE AWARDED TRANSCRIPT MUST BE SENT TO GMSRegistrar@bu.edu or via mail to: GMS Registrar Office, 72 E. Concord Street, L-309, Boston, MA 02118.**
3. **PLEASE NOTE: YOUR REQUEST WILL NOT BE PROCESSED UNTIL AN OFFICIAL TRANSCRIPT HAS BEEN RECEIVED.**
*Only a B.S. or B.A. undergraduate Official transcript is required.

Student Signature

Date

GMS Registrar Approval

Date