

# Summer Session Application

## APPLICATION FOR SUMMER SCHOOL COURSES

(Admission to Summer School does not constitute admission to degree programs at Lake Forest College)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Summer Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security No. \_\_\_\_\_

## I WISH TO ENROLL IN THE FOLLOWING COURSES:

(a full load consists of one course in Session I; two courses in Session II)

Session	Dept./Course No.	Course Title	Credit	Audit

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Advisor (LFC Students Only) \_\_\_\_\_

## NON-LFC UNDERGRADUATE AND HIGH SCHOOL STUDENTS ENROLLING IN COURSES MUST ALSO COMPLETE THE FOLLOWING:

College attended \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

High School attended \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Name of Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**In support of your application, submit a certificate of attendance and good standing or a transcript from the last college attended, or if you have not attended college, submit a high school transcript.**

## SEND APPLICATION TO:

Registrar, Summer Session, Lake Forest College, 555 N. Sheridan Road, Lake Forest, IL 60045-2399.

FOR OFFICE USE ONLY	Type	# Credits
Tuition		
Deposit		
Drop Date		