<u>University of Pittsburgh at Johnstown</u> <u>Application for Summer 2024 Visiting Students</u>

In order to complete the admission process for applicants at the University of Pittsburgh at Johnstown, print the following information clearly.

Name – Last, First, Mic		Social Security Number	
	Permanent Address	5	
City	State	Zip Code	County (PA only)
Phone Number		Email (REQUIF	RED) – Please print clearly!
Date of Birth	Sex: N	Male Femal	le
High School		Gradu	ation Date
 Have you ever attended Pitt-Johnstown befor	e? Yes	☐ No	
· — — —	S. Immigrant/ ermanent Resident Ali	Non-Immi en	grant Refugee
Are you a resident of Pennsylvania? If yes, for more than one year or less than one year? (Count back from the beginning of the term for which you are enrolling)			No, not a PA resident Yes, less than one year Yes, more than one year
Is your father a resident of Pennsylvania? If yes, for more than one year or less than one year? (Count back from the beginning of the term for which you are enrolling)			No, not a PA resident Yes, less than one year Yes, more than one year
Is your mother a resident of Pennsylvania? If yes, for more than one year or less than one year? (Count back from the beginning of the term for which you are enrolling)			No, not a PA resident Yes, less than one year Yes, more than one year
Is your guardian a resident of Pennsylvania? If yes, for more than one year or less than one year? (Count back from the beginning of the term for which you are enrolling)		g)	No, not a PA resident Yes, less than one year Yes, more than one year
Have you attended a college or University with If yes, College Name		Yes	□ No
College Address —			
I recorded the above. The information given is in dismissal. I authorize any employer, education University to verify any of the above information	onal institution, or age		
Student Signature			Date