



**COLUMBIA UNIVERSITY
INSTITUTE OF HUMAN NUTRITION**



**OFFICE OF ADMISSIONS
630 WEST 168TH STREET
PH 15 EAST, ROOM 1512
NEW YORK, NY 10032**

SPECIAL STUDENT INFORMATION SHEET

PART I

(1) SS # _____

(2) NAME _____

(2a) E-MAIL ADDRESS _____

PREVIOUS SURNAME _____

(3) LOCAL ADDRESS AT COLUMBIA

(4) PERMANENT ADDRESS

Street

Street

City State Zip

City State Zip

Phone # (____) _____

Phone # (____) _____

(5) NEXT OF KIN: _____

Month Day Year

RELATIONSHIP: _____

(6) Date of Birth: _____ / _____ / _____

(5b) NEXT OF KIN ADDRESS

(7) GENDER: _____ (F) FEMALE _____ (M) MALE

Street

(8) MARTIAL STATUS: _____ (S) Single

City State Zip

_____ (M) Married _____ (D) Divorced/Leg. Sep

NEXT OF KIN PHONE # (____) _____

_____ (W) Widowed _____ (T) Other

(9) ETHNIC ORIGIN (OPTIONAL): ___ (N) Non-res. Alien

_____ (H) Hispanic _____ (B) Black

___ (O) Asian

_____ (I) American Indian

___ (W) White

_____ (X) Other (specify): _____

(10) COUNTRY OF CITIZENSHIP: _____ U.S. _____ Other: (specify): _____

For U.S. citizens and permanent residents =>

STATE OF PERMANENT RESIDENCE: _____ for NY NJ CT => COUNTY _____

For non-U.S. citizens =>

VISA: _____ (PR) Permanent Resident

_____ F1 _____ J1 _____ Other (specify): _____

SPECIAL STUDENT INFORMATION SHEET (Continued)

(11) PREVIOUS ACADEMIC HISTORY

- | | | |
|---------------------------------|------------------------------|--------------------------------|
| _____ (AD) Assoc. Degree | _____ (3C) 3 yrs College | _____ (MD) Master's |
| _____ (JC) Jr. College | _____ (4C) 4 yrs College | _____ (SP) Specialist |
| _____ (2C) 2 yrs College | _____ (BD) Bachelor's Degree | _____ (DD) Doctorate |
| _____ (CC) Community College | _____ (BA) Bachelor of Arts | _____ (BS) Bachelor/Science |
| _____ (MA) Master of Arts | _____ (MS) Master of Science | _____ (PM) Master / Philosophy |
| _____ (PD) Doctor/Philosophy | _____ (LL) Bachelor of Laws | _____ (JD) Juris Doctor |
| _____ (MP) Master/Public Health | _____ (CE) Certificate | _____ (MD) Medical Doctor |

PREVIOUS COLLEGE / UNIVERSITY: _____
AND YEAR(S) ATTENDED OR GRADUATED: _____

PART II

FOR OFFICE USE ONLY

THE ADMISSION TO COLUMBIA UNIVERSITY

- (1) SCHOOL: _____ (2) DEGREE: _____ (3) MAJOR: _____
(4) BASIS FOR ADMISSION: _____
(5) COLLEGE CODE: _____

PROGRAMS:

DEGREE	CLASSIFICATION	MAJOR
MS	GM (Master of Science)	HNUT
MS	GM (Master of Science)	CLMI
SPL	SPG (Special Graduate)	

- (6) ADMIT TERM: _____ (7) READMIT TERM: _____ (8) ADMIT DATE: _____ / _____ / _____
(9) ADMIT TYPE: _____(NEW) New Beginning _____(TRF) New Transfer
_____ (REA) Informal readmit _____ (REF) Formal readmit
(10) ADMIT ACTION: _____(A) Admit _____(C) Wait list admit