



Application Form - Graduate Certificate of Global Competence

www.SNHUVT.org 802.489.5080 or 844.282.4484

Personal Information

Legal Name: _____
First Middle Last Previous Last Name(s)

Mobile phone: _____ Sex: Male Female Pronoun(s): _____

Other phone: _____ Social Security #: _____

Preferred E-Mail: _____

Birth Date: _____ Have you previously taken a course at SNHU? Yes No
Month Day Year

Home Mailing Address: _____
Box, Apt. or Street Name and Number

City State Zip Country

Are you a citizen or permanent resident of the United States? Yes No Country of Birth: _____
If no, what type of visa do you hold? Permanent Resident E2 L1 F1 Other

Education & Employment

College or University Attended _____
Institution Name City and State Degree & Year Received

College or University Attended _____
Institution Name City and State Degree & Year Received

Applicants to the program must submit an official undergraduate transcript indicating a degree earned and the date it was awarded.

Current Employer _____ Employment Position _____

Program Selection for Global Competency Certificate Coursework

This application is for the SNHU Graduate Certificate of Global Competency program, delivered through online and field-based coursework in collaboration with SNHU and World Savvy.

Certification

I, the undersigned and person named on this application, wish to apply to the program at Southern New Hampshire University (SNHU) indicated above. If accepted as an SNHU student, I agree to abide by all program and campus policies and guidelines. I also agree to abide by the rules, policies, and regulations of SNHU and pay all expenses incurred by me there. I agree that all information provided is true and accurate. Any information provided to SNHU, at any time, regardless of whether or not the individual is enrolled as a student at SNHU, shall be completely confidential and shall not be disclosed to anyone, except in accordance with or as required by federal regulation.

Applicant's Signature _____ Date _____

Applicant Notes/Other Information You Wish to Share: