Office of Graduate Studies The Avenue Notre Dame, IN 46556 (574) 284-5098 graduateadmission@saintmarys.edu

SMC Bridge Registration Form

To confirm your intent to enroll, please print and complete the following.

Name (Last, First, Middle)	Gender (Optional)	college most recently attended
Street Address	City & State	Postal Code
Country	Phone Number	Email Address
-		
US Citizen? Y/N	Date of Birth	
Will this be your first class at Saint Mary's: \Box Yes \Box No		
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Semester Entering:	□ SP 20	
Somester Entering. \Box Fall 20		

 \Box I give Saint Mary's College Graduate Admission Office permission to pull my Saint Mary's transcript from the Registrar's Office to confirm that I have or will satisfactorily complete the prerequisite courses.

 \Box I understand that if I completed any of the prerequisite courses or my baccalaureate degree at another institution I must arrange for official transcripts to be sent to <u>graduateadmission@saintmarys.edu</u>.

Send this form to graduateadmission@saintmarys.edu.