

Usfreshman Application

By checking this bokx, I represent that I have read, understood and agreed to the terms and conditions of the Privacy Policy (unless I am under the age of 16, in which case, my parent or legal guardian has also read, understood and agreed to the terms and conditions of the Privacy Policy (see below)).

Yes, I agree

Social Security Number

No spaces, dashes, or letters

Re-enter Social Security Number

No spaces, dashes, or letters

Last/Family Name *

Enter your legal last name

First Name *

Enter your legal first name

Middle Name

Suffix

Preferred First Name

If you attended school using a different name or took a standardized college entrance exam (for example SAT, GRE, TOEFL) using a different name (such as a maiden name), please check here to list another name/alias:

Yes, I have another name or alias I have used in the past

Other Last Name 1

Other First Name 1

Other Middle Name 1

Other Suffix Name 1

Check here to add another alias:

Yes, I have another name or alias I have used in the past

Other Last Name 2**Other First Name 2****Other Middle Name 2****Other Suffix Name 2****Check here to add another alias:**

- Yes, I have another name or alias I have used in the past

Other Last Name 3**Other First Name 3****Other Middle Name 3****Other Suffix Name 3****Date of Birth ***

Enter your date of birth (MM/DD/YYYY)

City of Birth ***Country of Birth *****State of Birth *****Province of Birth *****Name and Date of Birth confirmation**

It is important that your first name, last name, and date of birth are entered correctly. Please confirm that your name and date of birth are saved correctly before continuing

By checking this box, I confirm that my name and date of birth are represented correctly above *

- Yes, they are entered correctly

Are you a U.S. Citizen? *

- Yes
 No

Non-U.S. Citizens:

Because you indicated that you are not a U.S. Citizen, please answer the following questions:

Of what country are you a citizen? *

Do you hold Permanent Residence status (valid I-551) for the U.S.? *

- Yes
- No

If yes, date permanent resident card issued: *

Enter your date of birth (MM/DD/YYYY).

Alien Number *

Country of legal permanent residence *

If you are not a U.S. citizen or permanent resident, do you have an application for permanent residence (form I-485) pending with the U.S. Citizenship and Immigration Services (USCIS)? *

- Yes
- No
- Not Applicable

If you have an Individual Taxpayer Identification Number (ITIN) and do NOT have a Social Security Number filled in above, please enter it here. Otherwise, please leave blank.

If you are not a U.S. citizen or permanent resident or have no application pending with the USCIS, did you live or will you have lived in Texas for 36 consecutive months leading up to high school graduation or completion of the GED? *

- Yes
- No
- Not Applicable

If you are not a U.S. citizen or U.S. permanent resident, are you a foreign national here with a visa that makes you eligible to domicile for Texas residency purposes (see list of eligible visas) or are you a Refugee, Asylee, Parolee or here under Temporary Protective Status? *

Domestic applicants answer the following

Because you indicated that you are either a U.S. Citizen or U.S. Permanent Resident, we ask the following questions. These questions are not required.

Status as a current U.S. military servicemember, veteran, or dependent:

- veteran (former U.S. military servicemember)
- current U.S. military servicemember
- spouse or dependent of a veteran or a current U.S. military servicemember

- spouse or dependent of, or a veteran or current U.S. military servicemember with an injury or illness resulting from military service (service-connected injury/illness)
- spouse or dependent of a deceased U.S. servicemember

Are you Hispanic or Latino?

- Yes
- No

Please select the racial category or categories with which you most closely identify.

- American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.)
- Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine islands, Thailand, and Vietnam.)
- Black or African American (A person having origins in any of the black racial groups of Africa.)
- Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.)
- White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

Your gender:

- Female
- Male

Permanent Street Address *

address only - do not enter your name

Permanent Street Address line 2

be sure to include your apartment number, if you have one

Permanent Street Address Line 3

Permanent Address City *

Permanent Address Country *

Permanent Address State *

Permanent Address Province *

Permanent Address Postal/Zip Code

Permanent Address County

Permanent Address Verified Switch:

Physical Address Information:

This is the current street address where you reside. If your Physical

This is the current street address where you reside. If your Physical Address is the same as the Permanent Address you entered on the previous page, please leave these fields blank.

Physical Street Address

if different from permanent address

Physical Street Address line 2

be sure to include your apartment number, if you have one

Physical Street Address Line 3

Physical Address City

Physical Address Country

Physical Address State

Physical Address Province

Physical Address Postal/Zip Code

Area Address County

Physical Address Verified Switch:

Preferred Phone Number *

Numbers only, no dashes, dots, or parentheses, please. Please include your area code.

International Preferred Phone Country Code

International phone numbers only

Preferred Phone Type *

Alternate Phone Number

Numbers only, no dashes, dots, or parentheses, please. Please include your area code.

International Alternate Phone Country Code

International phone numbers only

Alternate Phone Type

Many schools use text messaging to communicate important admissions information to prospective students. Do you grant permission to the school(s) to which you are applying to send you text messages?

- Yes, please allow text messaging
- No, do not send me text messages

Emergency Contact Title

Emergency Contact Last Name *

Emergency Contact First Name *

Does your emergency contact have a phone? *

- Yes
- No

Emergency Contact Phone Number *

Numbers only, no dashes, dots, or parentheses, please. Please include area code.

International Phone Country Code

International phone numbers only

Emergency Contact Street Address

Emergency Contact Street Address line 2

Emergency Contact Address City

Emergency Contact Address Country

Emergency Contact Address State

Emergency Contact Address Province

Emergency Contact Address Postal/Zip Code

Emergency Contact Email Address

Emergency Contact Email Address confirmation

Your high school details:

Enter your high school/secondary school details on this page. Start by using our school search to find the school you graduated from or expect to graduate from. If you attended multiple high schools, you must click on the checkbox below to search for and enter additional high schools. If you are or were home-schooled, please type 'HOME SCHOOLED' in the search box and select either of the entries depending on whether you were home-schooled in Texas or not. You can also search by city by typing the city your high school is located in or adding it before your high school's name. If you never attended a high school/secondary school, type 'NEVER ATTENDED' and select the 'NEVER ATTENDED HIGH SCHOOL OR SECONDARY SCH' option.

High School/Secondary School Code: *

High School/Secondary School Name: *

High School/Secondary School City

High School/Secondary School Country

High School/Secondary School State

High School/Secondary School Province

Expected Graduation Date

Enter your graduation date (MM/DD/YYYY).

Check here if you have attended additional high schools or secondary schools:

Yes, I have other high schools to enter

Previous High School/Secondary School Code 1:

Previous High School/Secondary School 1 Name:

Previous High School/Secondary School 1 City

Previous High School/Secondary School 1 Country

Previous High School/Secondary School 1 State

Previous High School/Secondary School 1 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Check here if you have attended additional high schools or secondary schools:

Yes, I have other high schools to enter

Previous High School/Secondary School Code 2:

Previous High School/Secondary School 2 Name:

Previous High School/Secondary School 2 City

Previous High School/Secondary School 2 Country

Previous High School/Secondary School 2 State

Previous High School/Secondary School 2 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Check here if you have attended additional high schools or secondary schools:

Yes, I have other high schools to enter

Previous High School/Secondary School Code 3:

Previous High School/Secondary School 3 Name:

Previous High School/Secondary School 3 City

Previous High School/Secondary School 3 Country

Previous High School/Secondary School 3 State

Previous High School/Secondary School 3 Province

Select one

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Check here if you have attended additional high schools or secondary schools:

Yes, I have other high schools to enter

Previous High School/Secondary School Code 4:

Previous High School/Secondary School 4 Name:

Previous High School/Secondary School 4 City

Previous High School/Secondary School 4 Country

Select one

Previous High School/Secondary School 4 State

Select one

Previous High School/Secondary School 4 Province

Select one

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Do you have a GED or have you completed another high school equivalency program?

- Yes
- No

If yes, which version:

Select one

In which state did you receive your Certificate of High School Equivalency (GED, etc.)?

Select one

Date Certificate Completed

Enter the date you completed the GED (MM/DD/YYYY).

Have you taken any college courses? *

- Yes
- No

Will you have a bachelor's degree or an equivalent degree prior to the start of the semester for which you are applying?

- Yes, I will have a bachelor's degree (or an equivalent degree)
- No

Do you consent and agree that ApplyTexas and its partners (the Texas Higher Education Coordinating Board and AdmitHub) may communicate with you by email or text message (including SMS and MMS messages)? These messages may be about your account; provide information relevant to the college admissions process, scholarships and financial aid, and the college experience; or provide information and resources to help with finding a job. *

- Yes
- No

College Attended Information

Please list all post-secondary colleges or universities you have previously attended or are presently attending, including for extension, correspondence, and distance learning credit, starting with the most recent. **Failure to list all colleges will be considered an intentional omission and may lead to forced withdrawal.** Have an official transcript sent to each university to which you apply. It is your responsibility to submit official transcripts to each university applied from each institution attended.

College Code:

Name of College/University:

College/University City

College/University Country

College/University State

College/University Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:

Name of College/University 2:

College/University 2 City

College/University 2 Country

College/University 2 State

College/University 2 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:

Name of College/University 3:

College/University 3 City

College/University 3 Country

College/University 3 State

College/University 3 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:

Name of College/University 4:

College/University 4 City

College/University 4 Country

College/University 4 State**College/University 4 Province****Attended starting from:**

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type**Date Degree Earned or Expected:**

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:**Name of College/University 5:****College/University 5 City****College/University 5 Country****College/University 5 State****College/University 5 Province****Attended starting from:**

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:

Name of College/University 6:

College/University 6 City

College/University Country 6

College/University 6 State

College/University 6 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:**Name of College/University 7:****College/University 7 City****College/University 7 Country****College/University 7 State****College/University 7 Province****Attended starting from:**

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type**Date Degree Earned or Expected:**

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:**Name of College/University 8:**

College/University 8 City**College/University Country 8****College/University 8 State****College/University 8 Province****Attended starting from:**

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type**Date Degree Earned or Expected:**

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:**Name of College/University 9:****College/University 9 City****College/University 9 Country****College/University 9 State****College/University 9 Province**

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Check here to add another college you've previously attended:

Yes, I have additional previous college information to enter

College Code:

Name of College/University 10:

College/University 10 City

College/University Country 10

College/University 10 State

College/University 10 Province

Attended starting from:

Enter your starting attendance (MM/DD/YYYY).

Attended to:

Enter your ending attendance (MM/DD/YYYY).

Total Hours:

Enter the number of credit hours you earned at this institution

Degree Earned or Expected/Major Area of Study

Please indicate if you have earned or will earn a degree by the time you plan to attend

College Degree Type

Date Degree Earned or Expected:

Enter the date you earned or expect to earn the degree(MM/DD/YYYY).

Are you currently on academic suspension from the last college or university attended?

- Yes
- No

Profile Complete

Texas Residency Information

About this section: The college or university to which you are applying will use the information you provide in this section to determine your status for Texas residency eligibility. It is extremely important that you provide accurate information. If you believe you are eligible for Texas Residency and are claiming Texas residency, make sure to answer 'United States' to 'Of what country are you a resident?' and 'Texas' to 'Of what state are you a resident?'

Of what country are you a resident? *

Of what state are you a resident? *

Of what province are you a resident? *

Of what state or country are you a resident? *

Did you live or will you have lived in Texas for 36 consecutive months leading up to high school graduation or completion of the GED? *

- Yes
- No

When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 months? *

- Yes
- No

During the 12 months prior to the term for which you are applying, did you attend a public college or university in Texas in a fall or spring term (excluding summer)? *

- Yes
- No

What Texas public college or university did you last attend?

In which terms were you last enrolled?

- Fall 2021
- Spring 2022
- Fall 2022

During your last semester at a Texas public institution, did you pay resident (in-state) or nonresident (out-of-state) tuition?

- Resident (in-state)
- Nonresident (out-of-state)
- Unknown

If you paid in-state tuition at your last institution, was it because you were classified as a resident or because you were a nonresident who received a waiver?

- Resident
- Nonresident with a waiver
- Unknown/Not applicable

Are you claimed as a dependent or are you eligible to be claimed as a dependent by a parent or court-appointed legal guardian? *

- Yes
- No

Do you file your own federal income tax as an independent tax payer? *

- Yes
- No

Who provides the majority of your support? *

- Self
- Parent or Legal Guardian
- Other: (list below)

If you answered 'other' above, please list:

note: if you check 'other' please provide an explanation in the 'General Comments' box at the end of the residency section

Please open the Residency Affidavit, print a copy, fill it out and submit it to the school to which you are applying.

- Done!

Do you currently live in Texas? *

- Yes
- No

If you currently live in Texas, how many years have you been living here?

Enter the number of years you have lived in Texas

If you currently live in Texas, how many months (not including the years you entered above) have you been living here?

Enter the number of months you have lived in Texas

If you currently live in Texas, what is your main purpose for being in the state?

If you are a member of the U.S. military, is Texas your Home of Record?

- Yes
- No
- Not Applicable

If you are a member of the U.S. military, what state is listed as your military legal residence for tax purposes on your Leave and Earnings Statement?

Select one

Do you hold the title to residential real property in Texas? *

- Yes
- No

If yes, enter the date you acquired the title:

Enter the date you acquired the title to residential real property (MM/DD/YYYY).

Do you have ownership interest and customarily manage a business in Texas without the intention of liquidation in the foreseeable future? *

- Yes
- No

If yes, enter the date you acquired the Texas business:

Enter the date you acquired the Texas business (MM/DD/YYYY).

Have you been gainfully employed in Texas for the past 12 months? *

- Yes
- No

Have you received primary support from a social services agency for the past 12 months? *

- Yes
- No

Are you married to a person who either: owns property in Texas, owns a business in Texas, is gainfully employed in Texas, or has received primary support from a social service agency? *

- Yes
- No

If yes, indicate which question could be answered 'yes' by your spouse:

Select one

When did you marry the Texas Resident

Enter the date you married the Texas resident (MM/DD/YYYY).

Is the parent or legal guardian upon whom you base your claim of residency a U.S. Citizen? *

- Yes
- No


If not, is the parent or legal guardian upon whom you base your claim of residency a Permanent Resident of the U.S.?

- Yes
- No

Is this parent or legal guardian a foreign national whose application for Permanent Resident Status has been preliminarily reviewed?

- Yes
- No
- Not Applicable

Is this parent or legal guardian a foreign national here with a visa eligible to domicile in the United States or is he/she a Refugee, Asylee, Parolee or here under Temporary Protective Status?

Select one 

Does this parent or guardian currently live in Texas? *

- Yes
- No

If your parent or legal guardian is currently living in Texas, how many years have they been living here?

Enter the number of years your parent has lived in Texas

If your parent or legal guardian is currently living in Texas, how many months (not including the years you entered above) have they been living here?

Enter the number of months your parent has lived in Texas


What is your parent's or legal guardian's main purpose for being in the state?

Select one 

If your parent or legal guardian is a member of the U.S. military, is Texas her or his Home of Record?

- Yes
- No
- Not Applicable

If your parent or legal guardian is a member of the U.S. military, what state is listed as her or his military legal residence for tax purposes on her or his Leave and Earnings Statement?

Select one 

Does your parent or legal guardian hold the title to residential real property in Texas? *

- Yes
- No

If yes, enter the date they acquired the title:

Enter the date they acquired the title to residential real property (MM/DD/YYYY).

Does your parent or legal guardian have ownership interest and customarily manage a business in Texas without the intention of liquidation in the foreseeable future? *

- Yes
- No

If yes, enter the date they acquired the Texas business:

Enter the date they acquired the Texas business (MM/DD/YYYY).

Has your parent or legal guardian been gainfully employed in Texas for the past 12 months? *

- Yes
- No

Has your parent or legal guardian received primary support from a social services agency for the past 12 months? *

- Yes
- No

Is your parent or legal guardian married to a person who either: owns property in Texas, owns a business in Texas, is gainfully employed in Texas, or has received primary support from a social service agency? *

- Yes
- No

If yes, indicate which question could be answered 'yes' by your parent or legal guardian's spouse:

Select one

When did your parent or legal guardian marry the Texas Resident?

Enter the date your parent or legal guardian married the Texas resident (MM/DD/YYYY).

Are you currently residing in the U.S.? *

- Yes
- No

If you are currently residing in the U.S., please select your current visa type:

Select one

Other Visa Type (if not listed above)

If an expiration date is indicated on your form I-94, please enter it:

Visa expiration date

Will you require a change in your visa status? *

- Yes
- No
- Unsure

If you are already in the U.S., do you plan to leave the U.S. before enrolling at the university to which you are applying? *

- Yes
- No

If yes, approximate date of travel

Estimated start date of travel outside U.S.

If you will require a change in your visa status, what type of visa is expected?

- Student (F-1) Visa
- Exchange (J-1) Visa

Expected source of financial support if you are, or will be, in F-1 or J-1 status:

- Personal or family funds
- Government or private sponsor (include full name of sponsor below)
- Other (please specify source below)

If expecting financial support from government or private sponsor, please enter full name of sponsor:

If expecting 'other' financial support, please enter source:

What is your marital status?

- Married
- Single

Spouse Full Legal Last/Family Name

Enter your spouse's legal last name

Spouse First/given Name

Enter your spouse's legal first name

Spouse Middle Name

Spouse Date of Birth

Enter your spouse's date of birth (MM/DD/YYYY).

Spouse City of Birth

Spouse Country of Birth

Spouse country of citizenship

Do you have children?

- Yes
- No

Child 1 Legal Last/Family Name

Enter your child's legal last name

Child 1 First/given Name

Enter your child's legal first name

Child 1 Middle Name

Child 1 Date of Birth

Enter your child's date of birth (MM/DD/YYYY).

Child 1 City of Birth**Child 1 Country of Birth****Child 1 country of citizenship****Child 1 Gender**

- Female
- Male

Check here to add another child:

- Yes, I have an additional child to enter

Child 2 Legal Last/Family Name

Enter your child's legal last name

Child 2 First/given Name

Enter your child's legal first name

Child 2 Middle Name**Child 2 Date of Birth**

Enter your child's date of birth (MM/DD/YYYY).

Child 2 City of Birth**Child 2 Country of Birth****Child 2 country of citizenship****Child 2 Gender**

- Female
- Male

Check here to add another child:

- Yes, I have an additional child to enter

Child 3 Legal Last/Family Name

Enter your child's legal last name

Child 3 First/given Name

Enter your child's legal first name

Child 3 Middle Name

Child 3 Date of Birth

Enter your child's date of birth (MM/DD/YYYY).

Child 3 City of Birth

Child 3 Country of Birth

Child 3 country of citizenship

Child 3 Gender

- Female
- Male

Check here to add another child:

- Yes, I have an additional child to enter

Child 4 Legal Last/Family Name

Enter your child's legal last name

Child 4 First/given Name

Enter your child's legal first name

Child 4 Middle Name

Child 4 Date of Birth

Enter your child's date of birth (MM/DD/YYYY).

Child 4 City of Birth

Child 4 Country of Birth

Child 4 country of citizenship

Child 4 Gender

- Female
- Male

Check here to add another child:

- Yes, I have an additional child to enter

Child 5 Legal Last/Family Name

Enter your child's legal last name

Child 5 First/given Name

Enter your child's legal first name

Child 5 Middle Name

Child 5 Date of Birth

Enter your child's date of birth (MM/DD/YYYY).

Child 5 City of Birth

Child 5 Country of Birth

Child 5 country of citizenship

Child 5 Gender

- Female
- Male

Would you like to designate someone besides yourself to be able to discuss your file with the target university's admissions office?

- Yes
- No

Application Representative Title

Application Representative Name

Application Representative Phone

Numbers only, no dashes, dots, or parentheses, please. Please include the area code.

Application Representative Phone Country Code

International phone numbers only

Application Representative Address Line 1

Application Representative Address Line 2

Parent/Guardian 1's education level

Parent/Guardian 1's relationship to you

Parent/Guardian 2's education level

Parent/Guardian 2's relationship to you

At any time in your life were you placed in foster care or adopted from foster care in Texas? *

- Yes
- No

If admitted, would you like to receive information on possible eligibility for financial and other assistance for students who were placed in foster care in Texas?

- Yes
- No

In addition to English, what languages do you speak fluently?

Years Spoken?

Enter the number of years you have spoken this language

Select any other language you speak fluently

Years Spoken?

Enter the number of years you have spoken this language

Please indicate, for the most recent tax year, your family's gross income. Include both taxed and untaxed income:

How many people, including yourself, live in your household? *

Include everyone in household, including brothers and sisters attending college

Do you have family obligations that keep you from participating in extracurricular activities?

- Yes
- No

If you have family obligations, do you have to work to supplement family income?

- Yes, I have to work to supplement family income

Please describe the work

If you have family obligations, do you provide primary care for family members?

- Yes, I provide primary care for family members

Please describe the care

If you have family obligations, do you have other family obligations that prevent participation?

- Yes, I have other family obligations

Please describe the other family obligations

Parent/Guardian 1 Title

Parent/Guardian 1 Last Name *

Parent/Guardian 1 First Name *

Parent/Guardian 1 Middle Initial

Parent/Guardian 1 Suffix

Is this parent/guardian still living? *

- Yes
- No

Do you live with this parent/guardian?

- Yes
- No

Parent/Guardian 1 Street Address

Parent/Guardian 1 Street Address line 2

Parent/Guardian 1 Address City

Parent/Guardian 1 Address Country

Parent/Guardian 1 Address State

Parent/Guardian 1 Address Province

Parent/Guardian 1 Address Postal/Zip Code

Parent/Guardian 1 Preferred Phone Number

Numbers only, no dashes, dots, or parentheses, please. Please include area code.

Parent/Guardian 1 Preferred Phone International Country Code

Parent/Guardian 1 Phone Type

Parent/Guardian 1 Alternate Phone Number

Numbers only, no dashes, dots, or parentheses, please. Please include area code.

Parent/Guardian 1 Alternate Phone International Country Code

Parent/Guardian 1 Alternate Phone Type

Parent/Guardian 1 Email Address

Parent/Guardian 1 Email Address confirmation

Check here to add another parent/guardian

Yes, I would like to add another parent/guardian

Parent/Guardian 2 Title

Parent/Guardian 2 Last Name

Parent/Guardian 2 First Name

Parent/Guardian 2 Middle Initial

Parent/Guardian 2 Suffix

Is this parent/guardian still living?

- Yes
- No

Do you live with this parent/guardian?

- Yes
- No

Parent/Guardian 2 Street Address

Parent/Guardian 2 Street Address line 2

Parent/Guardian 2 Address City

Parent/Guardian 2 Address Country

Parent/Guardian 2 Address State

Parent/Guardian 2 Address Province

Parent/Guardian 2 Address Postal/Zip Code

Parent/Guardian 2 Preferred Phone Number

Numbers only, no dashes, dots, or parentheses, please. Please include area code.

Parent/Guardian 2 Preferred Phone International Country Code

Parent/Guardian 2 Phone Type

Parent/Guardian 2 Alternate Phone Number

Numbers only, no dashes, dots, or parentheses, please. Please include area code.

Parent/Guardian 2 Alternate Phone International Country Code

Parent/Guardian 2 Alternate Phone Type

Parent/Guardian 2 Email Address

Parent/Guardian 2 Email Address confirmation

Are you a freshman with:

- no previous college credit hours
- college credit hours

Please enter the total number of college credit hours you will have by graduation

Are your college credit hours earned (or being earned) through dual credit, concurrent enrollment, or an early college high school?

- Yes, all or some of my college credit hours have been earned through classwork
- No, my hours have been earned through testing

At least one previous college required

You have indicated previous college hours earned through dual credit, concurrent enrollment, or an early college high school. Please note that you must enter the college you earned these hours with on your profile

Are you home-schooled? *

- Yes
- No

School information

If you were home-schooled during your high school years, please make sure you entered 'Home Schooled' on your profile and selected the appropriate home-schooled code.

Do you plan to graduate with an IB (International Baccalaureate) diploma? *

- Yes
- No

If you plan to pursue a preprofessional program, please specify which one:

Will you seek teacher certification? *

- Yes
- No

If yes, indicate which level:

ACT test

- I have taken or will take the ACT

When did you or will you take the ACT?

Enter the date of the test (MM/DD/YYYY)

SAT test

- I have taken or will take the SAT test

When did you or will you take the SAT?

Enter the date of the test (MM/DD/YYYY)

TOEFL: Test of English as a Foreign Language

- I have taken or will take the TOEFL: Test of English as a Foreign Language

When did you or will you take the TOEFL?

Enter the date of the test (MM/DD/YYYY)

IELTS: International English Language Testing System

- I have taken or will take the IELTS: International English Language Testing System

When did you or will you take the IELTS?

Enter the date of the test (MM/DD/YYYY)

Your transcript will be shared with the community college(s) you previously attended to consider your eligibility for and awarding of an Associate degree (if you qualify). Do you consent? *

- Yes
- No
- Not applicable, this question does not apply to me

Senior Course Information

List exact titles of courses you will complete your senior year. Indicate if the course is an AP or IB course, dual credit or concurrent enrollment, and when the course was taken. Include college course

work, if any, you will complete during your senior year.

Senior Course 1 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
 My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
 2nd trimester
 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 2 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
 My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
 2nd trimester
 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 3 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
 My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
 2nd trimester
 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 4 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
 My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
 2nd trimester
 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 5 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
 My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 6 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
- My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 7 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
- My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 8 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
- My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 9 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
- My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

I have more senior courses to enter

- I need to add another senior course

Senior Course 10 Title

Is this course Advanced Placement or International Baccalaureate?

- Yes, this course is AP or IB

Is this course Dual Credit or Concurrent Enrollment?

- Yes, this course is Dual Credit or Concurrent Enrollment

Is your high school's academic year divided into semesters or trimesters?

- My school's academic year is divided into semesters
- My school's academic year is divided into trimesters

Which semester(s) did or will you take this course?

- 1st semester
- 2nd semester

Which trimester(s) did or will you take this course?

- 1st trimester
- 2nd trimester
- 3rd trimester

Extracurricular Activities

Please list, in priority order, the clubs, teams and other organizations you have participated in throughout your high school career that indicate your special contributions, talents, honors and abilities in the areas of extracurricular activities, service and work. Include service and work done in the summer. Please spell out the names and describe the organizations in which you have participated. We recommend saving often using the 'save' button below the section. Please do not enter special characters: acceptable characters are letters (a-z, A-Z), numbers (0-9), hyphen (-), apostrophe ('), period (.), ampersand (&) and forward slash (/).

Extracurricular section not required

This school does not ask applicants to fill out this section. Please proceed to the next section of the application.

Extracurricular 1 Organization/Activity

Extracurricular 1 Description

Extracurricular 1 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 1 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 1 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 1 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 1 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 2 Organization/Activity

Extracurricular 2 Description

Extracurricular 2 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 2 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 2 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 2 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 2 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 3 Organization/Activity

Extracurricular 3 Description

Extracurricular 3 Activity Level

Select one

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
 I participated as a sophomore
 I participated as a junior
 I participated as a senior

Extracurricular 3 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
 No, I was not elected
 Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 3 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
 No, I was not elected
 Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 3 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
 No, I was not elected
 Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 3 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 4 Organization/Activity

Extracurricular 4 Description

Extracurricular 4 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 4 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 4 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected

- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 4 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 4 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 5 Organization/Activity

Extracurricular 5 Description

Extracurricular 5 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 5 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 5 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 5 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 5 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 6 Organization/Activity

Extracurricular 6 Description

Extracurricular 6 Activity Level

Select one

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 6 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 6 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 6 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 6 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 7 Organization/Activity

Extracurricular 7 Description

Extracurricular 7 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 7 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 7 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 7 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 7 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 8 Organization/Activity

Extracurricular 8 Description

Extracurricular 8 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 8 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 8 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 8 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 8 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

- I need to add another extracurricular activity

Extracurricular 9 Organization/Activity

Extracurricular 9 Description

Extracurricular 9 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore

- I participated as a junior
- I participated as a senior

Extracurricular 9 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 9 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 9 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 9 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

I have more extracurricular activities to enter

I need to add another extracurricular activity

Extracurricular 10 Organization/Activity

Extracurricular 10 Description

Extracurricular 10 Activity Level

Please check the years you participated in this Organization/Activity during high school

- I participated as a freshman
- I participated as a sophomore
- I participated as a junior
- I participated as a senior

Extracurricular 10 Freshman Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 10 Sophomore Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 10 Junior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Extracurricular 10 Senior Year Position(s) Held

Were you elected to this position?

- Yes, I was elected
- No, I was not elected
- Not Applicable

How many hours per week did you participate?

How many weeks per year did you participate?

Community or Volunteer Service

Please list, in priority order, the other organizations you have participated in throughout your high school career that indicate your special contributions and abilities in the areas of service and work. Include service and work done in the summer. Please spell out the names and describe the organizations in which you have participated. We recommend saving often using the 'save' button below the section. Please do not enter special characters: acceptable characters are letters (a-z, A-Z), numbers (0-9), hyphen (-), apostrophe ('), period (.), ampersand (&) and forward slash (/).

Community/Volunteer Service section not required

This school does not ask applicants to fill out this section. Please proceed to the next section of the application.

Service Experience 1 Place of Service

Service Experience 1 Description of Service

Service Experience 1 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

- I need to add another volunteer service

Service Experience 2 Place of Service

Service Experience 2 Description of Service

Service Experience 2 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 3 Place of Service

Service Experience 3 Description of Service

Service Experience 3 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 4 Place of Service

Service Experience 4 Description of Service

Service Experience 4 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 5 Place of Service

Service Experience 5 Description of Service

Service Experience 5 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 6 Place of Service

Service Experience 6 Description of Service

Service Experience 6 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 7 Place of Service

Service Experience 7 Description of Service

Service Experience 7 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

I have more volunteer services to enter

I need to add another volunteer service

Service Experience 8 Place of Service

Service Experience 8 Description of Service

Service Experience 8 Total Hours

When did you start this service experience?

Enter the date the service started (MM/DD/YYYY)

When did you complete this service experience?

Enter the date the service completed (MM/DD/YYYY)

Talents, Awards, Honors

Please list, in priority order your talents, awards, and honors. Please spell out the names and describe the organizations in which you have participated. We recommend saving often using the 'save' button below the section. Please do not enter special characters: acceptable characters are letters (a-z, A-Z), numbers (0-9), hyphen (-), apostrophe ('), period (.), ampersand (&) and forward slash (/).

Talents, Awards, Honors section not required

This school does not ask applicants to fill out this section. Please proceed to the next section of the application.

Award, Honor, Distinction 1

Description, Basis, Sponsor

Level

Select one

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

I need to add another talent/award/honor

Award, Honor, Distinction 2

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 3

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 4

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 5

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2

- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 6

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 7

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

I have more talents/awards/honors to enter

- I need to add another talent/award/honor

Award, Honor, Distinction 8

Description, Basis, Sponsor

Level

Please select the year or years in high school that you received this recognition

- Freshman/Year 1
- Sophomore/Year 2
- Junior/Year 3
- Senior/Year 4

Employment, Internships, Summer Activities

Please list your employment, internships, and summer activities below.

Employments, Internships, Summer Activities section not required

This school does not ask applicants to fill out this section. Please proceed to the next section of the application.

List your specific role/job title for employment/internship/activity 1

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 2

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 3

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 4

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 5

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 6

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 7

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

I have more employments/internships/activities to enter

I need to add another employment/internship/activity

List your specific role/job title for employment/internship/activity 8

Employer

Hours per week

When did you start this employment/internship/activity?

Enter the date the employment/internship/activity started (MM/DD/YYYY)

When did you complete this employment/internship/activity?

Enter the date the employment/internship/activity completed (MM/DD/YYYY)

* Required Field