

# Usgraduate Application

**By checking this box, 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**

Select one

**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**

Select one

**Emergency Contact Address State**

Select one

**Emergency Contact Address Province**

Select one

**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**

Select one 

**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**

Select one 

**College/University 2 State**

Select one 

**College/University 2 Province**

Select one 

**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**

Select one 

**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**

**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:**

**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**

**Will you seek teacher certification? \***

- Yes
- No

**If yes, indicate which level:**

Select one

**Initial Degree you wish to seek: \***

Select one

**Ultimate degree you plan to seek in this major: \***

Select one

**Are you a former student at this school? \***

- Yes
- No

**Have you previously applied to this school as a graduate student? \***

- Yes
- No

**Enter any specific area of interest or specialty within your proposed major: \***

Select one

**If you wish to be considered for a teaching assistantship, research assistantship, or fellowship, indicate the type of award you will seek.**

- Graduate Assistantship
- Fellowship
- Teaching Assistantship
- Research Assistantship

**If you are not offered a financial award, do you plan to enroll if offered admission?**

- Yes
- No

### **Current Course Information**

List courses to be completed during the present semester (if applicable). If you will complete an additional term before enrolling, list those courses also. If you need to list more than 10 courses, please send a list directly to the appropriate admissions office. Be sure to include your full name, application ID number and date of birth on any documents you send to the admissions office.

#### **Current Course Title 1**

**I have more current coursework to enter**

- I need to add another current college course

#### **Current Course Title 2**

**I have more current coursework to enter**

- I need to add another current college course

#### **Current Course Title 3**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 4**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 5**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 6**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 7**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 8**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 9**

**I have more current coursework to enter**

- I need to add another current college course

**Current Course Title 10**

**Test Information**

Check those tests you have taken or plan to take. Report scores from any test you have taken. Consult the institution to which you are applying to determine which entrance exam(s) are required. Please have official test scores sent to the universities to which you apply.

**Test Information**

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

**GRE: Graduate Record Examinations General Test**

I have taken or will take the GRE: Graduate Record Examinations General Test

**When did you or will you take the GRE?**

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

**When did or will you request your GRE scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**GRE Verbal test score**

Enter your GRE verbal score if known

**GRE Quantitative test score**

Enter your GRE quantitative score if known

**GRE Analytical Writing test score**

Enter your GRE analytical writing score if known

**GMAT: Graduate Management Admissions Test**

I have taken or will take the GMAT: Graduate Management Admissions Test

**When did you or will you take the GMAT?**

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

**When did or will you request your GMAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**GMAT Verbal test score**

Enter your GMAT verbal score if known

**GMAT Quantitative test score**

Enter your GMAT quantitative score if known

**GMAT Analytical Writing test score**

Enter your GMAT analytical writing score if known

**GMAT Integrated Reasoning test score**

Enter your GMAT Integrated Reasoning score if known

**GMAT Total test score**

Enter your GMAT total score if known

**MCAT: Medical College Admissions Test**



I have taken or will take the MCAT: Medical College Admissions Test

**When did you or will you take the MCAT?**

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

**When did or will you request your MCAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**MCAT Chemical and Physical Foundations of Biological Systems test score**

Enter your MCAT Chemical and Physical Foundations of Biological Systems score if known

**MCAT Critical Analysis and Reasoning Skills**

Enter your MCAT Critical Analysis and Reasoning Skills score if known

**MCAT Biological and Biochemical Foundations of Living Systems test score**

Enter your MCAT Biological and Biochemical Foundations of Living Systems score if known

**MCAT Psychological, Social, and Biological Foundations of Behavior test score**

Enter your MCAT Psychological, Social, and Biological Foundations of Behavior score if known

**MAT: Miller Analogies Test**

I have taken or will take the MAT: Miller Analogies Test

**When did you or will you take the MAT?**

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

**When did or will you request your MAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**MAT Raw Score**

Enter your MAT raw score if known

**MAT Percentage - General test score**

Enter your MAT Percentage - general score if known

**MAT Percentage - Major test score**

Enter your MAT Percentage - major score if known

**DAT: Dental Admission Test**

I have taken or will take the DAT: Dental Admission Test

**When did you or will you take the DAT?**

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

**When did or will you request your DAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**DAT Biological Sciences Score**

Enter your DAT biological sciences score if known

**DAT General Chemistry test score**

Enter your DAT general chemistry score if known

**DAT Organic Chemistry test score**

Enter your DAT organic chemistry score if known

**DAT Perceptual Ability test score**

Enter your DAT Perceptual Ability score if known

**DAT Reading test score**

Enter your DAT Reading score if known

**DAT Quantitative test score**

Enter your DAT Quantitative score if known

**LSAT: Law School Admissions Test**

I have taken or will take the LSAT: Law School Admissions Test

**When did you or will you take the LSAT?**

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

**When did or will you request your LSAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**LSAT Raw Score**

Enter your LSAT Raw Score if known

**LSAT Average test score**

Enter your LSAT Average score if known

**LSAT Percent Rank**

Enter your LSAT Percent Rank if known

**PCAT: Pharmacy College Admissions Test**

I have taken or will take the PCAT: Pharmacy College Admissions Test

**When did you or will you take the PCAT?**

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

**When did or will you request your PCAT scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**PCAT Verbal Ability test score**

Enter your PCAT Verbal Ability score if known

**PCAT Biological Sciences test score**

Enter your PCAT Biological Sciences score if known

**PCAT Reading Comprehension test score**

Enter your PCAT organic chemistry score if known

**PCAT Quantitative test score**

Enter your PCAT Quantitative score if known

**PCAT General Chemistry test score**

Enter your PCAT General Chemistry score if known

**PCAT Composite test score**

Enter your PCAT Composite score if known

**PCAT Writing test score**

Enter your PCAT Writing score if known

**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)

**When did or will you request your TOEFL scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**Which version of the TOEFL test have you or will you take?**

- I have taken or will take the Internet-Based Test
- I have taken or will take the Paper Test
- Reset Answer - Not Applicable

**TOEFL Section 1 Listening test score**

Enter your TOEFL Section 1 Listening score if known

**TOEFL Section 2 Writing test score**

Enter your TOEFL Section 2 Writing score if known

**TOEFL Section 3 Reading test score**

Enter your TOEFL Section 3 Reading score if known

**TOEFL Speaking test score**

Enter your TOEFL Speaking score if known

**TOEFL Essay test score**

Enter your TOEFL Essay score if known

**TOEFL Total test score**

Enter your TOEFL Total score if known

**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)

**When did or will you request your IELTS scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**IELTS Listening test score**

Enter your IELTS Listening score if known

**IELTS Writing test score**

Enter your IELTS Writing score if known

**IELTS Reading test score**

Enter your IELTS Reading score if known

**IELTS Speaking test score**

Enter your IELTS Speaking score if known

**IELTS Overall test score**

Enter your IELTS Overall score if known

**TSE: Test of Spoken English**

I have taken or will take the TSE: Test of Spoken English

**When did you or will you take the TSE?**

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

**When did or will you request your TSE scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**TSE Test Score**

Enter your TSE Test score if known

**TWE: Graduate Record Examinations General Test**

I have taken or will take the TWE: Graduate Record Examinations General Test

**When did you or will you take the TWE?**

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

**When did or will you request your TWE scores to be sent to the school?**

Enter the date the scores were or will be sent (MM/DD/YYYY)

**TWE Score**

Enter your TWE score if known

**Employment History**

If relevant to your major, complete the following employment history section. If you have been employed since attending school or have served in the armed forces, list your employers or military service and type of work in chronological order, beginning with your most recent employer. If you have been self-employed (homemaker, writer, etc.), write 'self' under 'NAME OF EMPLOYER.' If you are currently employed, put the current month and year in the 'To' section.

**Employment Section not required**

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

**Current or Most Recent Employer****Employer City****Employer Country****Employer State****Employer Province****Your Work Phone Number**

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

**Your Work Fax Number**

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

**Your Work Email Address**

**May we contact you at work?**

- Yes
- No
- Reset Answer - Not Applicable

**Job Category**

**Industry Category**

**Type of Work/Title**

**Start Date:**

Enter the date you started at this employer (MM/DD/YYYY)

**End Date:**

Enter the current date (MM/DD/YYYY)

**Check here to add another previous employer**

- Yes, I would like to add another previous employer

**Previous Employer 2**

**Previous Employer 2 City**

**Previous Employer 2 Country**

**Previous Employer 2 State**

**Employer Province**

**Previous Employer 2 Duties**

**Start Date:**

Enter the date you started at this employer (MM/DD/YYYY)

**End Date:**

Enter the date you finished at this employer (MM/DD/YYYY)

**Check here to add another previous employer**

Yes, I would like to add another previous employer

**Previous Employer 3**

**Previous Employer 3 City**

**Previous Employer 3 Country**

**Previous Employer 3 State**

**Employer Province**

**Previous Employer 3 Duties**

**Start Date:**

Enter the date you started at this employer (MM/DD/YYYY)

**End Date:**

Enter the date you finished at this employer (MM/DD/YYYY)

**Check here to add another previous employer**

Yes, I would like to add another previous employer

**Previous Employer 4**

**Previous Employer 4 City**

**Previous Employer 4 Country**

**Previous Employer 4 State**

**Employer Province**

**Previous Employer 4 Duties**

**Start Date:**

Enter the date you started at this employer (MM/DD/YYYY)

**End Date:**

Enter the date you finished at this employer (MM/DD/YYYY)

**Academic references**

List the individuals you have asked to recommend you.

**Academic references not required**

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

**Reference 1 Name**

**Reference 1 Position**

**Reference 1 Organization**

**Reference 1 Email**

**Check here to add another reference**

Yes, I would like to add another reference

**Reference 2 Name**

**Reference 2 Position**

**Reference 2 Organization**

**Reference 2 Email**

**Check here to add another reference**

Yes, I would like to add another reference

**Reference 3 Name**

**Reference 3 Position**

**Reference 3 Organization**

**Reference 3 Email**



## Honors

List all honors, financial assistance, awards, fellowships, scholarships and assistantships received. If you need to list more than three awards, please send a list, along with your student ID number (if known), web application ID number, full name and date of birth directly to the graduate admissions office.

### 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 1 Designation

#### Award/Honor 1 Grantor

#### Date received

Enter the date you received this honor (MM/DD/YYYY)

#### Award/Honor 1 In Recognition Of

#### Check here to add another award/honor

Yes, I would like to add another award/honor

#### Award/Honor 2 Designation

#### Award/Honor 2 Grantor

#### Date received

Enter the date you received this honor (MM/DD/YYYY)

#### Award/Honor 2 In Recognition Of

#### Check here to add another award/honor

Yes, I would like to add another award/honor

#### Award/Honor 3 Designation

#### Award/Honor 3 Grantor

#### Date received

Enter the date you received this honor (MM/DD/YYYY)

#### Award/Honor 3 In Recognition Of

## 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**

**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**

**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)

\* Required Field