

This form is developed for, and is to be used by, the members of the Universal College Application. All members evaluate this form equally with all other forms accepted by the institution. Please type or print neatly.

College Name _____

- Regular Decision I Early Decision I
 Regular Decision II Early Decision II
 Restrictive Early Action Early Action

I am applying for the term beginning _____

Possible Major _____

Possible Career Plans _____

PAYMENT INFORMATION

Are you planning to apply for a counselor-approved fee waiver? Yes No Are you applying for financial aid? Yes No

If you are applying for financial aid, when did/will you file the appropriate form(s) (FAFSA, CSS Profile, etc.)? _____

PERSONAL INFORMATION

Please enter your name as it appears on your passport or other official documents.

Legal Name _____ Date of Birth _____
Last (Family) First Middle Suffix (Jr., Sr., etc.) (mm/dd/yyyy)

Legal Sex: Male X Gender Identity (optional): Man Woman Nonbinary Pronouns: He/Him She/Her They/Them
 Female Add another gender _____ Add another pronoun set _____

Social Security Number (optional) _____
(###-##-####)

Chosen Name _____

Previous Last Name(s), if any _____

Email _____

Marital Status _____
(single, married, etc.)

PERMANENT ADDRESS

Street Address _____ Apt. # _____
City/Town _____ State/Province _____ Country _____ Zip/Postal Code _____

Phone _____
Begin with Area or Country Code

Alternate Phone _____
Begin with Area or Country Code

Please give your current address for all admission correspondence, if different from above.

CURRENT MAILING ADDRESS

Street Address _____ Apt. # _____
City/Town _____ State/Province _____ Country _____ Zip/Postal Code _____

Current Mailing Address Phone _____
Begin with Area or Country Code

Current mailing address valid from _____ to _____
(mm/dd/yyyy) (mm/dd/yyyy)

CITIZENSHIP

Place of Birth _____
City/Town _____ State/Province _____ Country _____

US Citizen Dual US citizen; please specify other country of citizenship _____

US permanent resident visa; citizen of _____ Alien registration number _____

Other Citizenship _____
Visa

If you live in the United States, but are not a U.S. citizen, how many years have you lived in the country? _____

If not English, language spoken in your home _____ If not English, list your first language _____

ETHNICITY

Race/Ethnicity information is optional. Information you provide will not be used in a discriminatory manner.

Are you Hispanic or Latino? Yes No (country of family's origin _____)

How would you describe your racial background? (select one or more of the following categories):

- Asian (country of family's origin _____)
- Black or African American
- American Indian or Alaska Native (enrolled _____
Tribal affiliation _____)
- Native Hawaiian or Other Pacific Islander
- White

FAMILY INFORMATION

PARENT/GUARDIAN #1

Parent Guardian _____

Prefix	Last (Family)	First	Middle	Suffix
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Male Female X Living? Yes No (Date Deceased _____)
(mm/dd/yyyy)

If different from yours

Address _____

Street Address	Apt. #
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City/Town	State/Province	Country	Zip / Postal Code
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Phone _____ Email _____
Begin with Area or Country Code

Profession _____ Position _____

Employer _____

College Attended (if any) _____ Degree Earned _____ Year _____

Graduate School Attended (if any) _____ Highest Degree Earned _____ Year _____

PARENT/GUARDIAN #2

Parent Guardian _____

Prefix	Last (Family)	First	Middle	Suffix
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Male Female X Living? Yes No (Date Deceased _____)
(mm/dd/yyyy)

If different from yours

Address _____

Street Address	Apt. #
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City/Town	State/Province	Country	Zip / Postal Code
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Phone _____ Email _____
Begin with Area or Country Code

Profession _____ Position _____

Employer _____

College Attended (if any) _____ Degree Earned _____ Year _____

Graduate School Attended (if any) _____ Highest Degree Earned _____ Year _____

Your parents are _____ If divorced, list date _____
(married, divorced, etc.) (mm/dd/yyyy)

With whom do you reside? Both Parent/Guardian#1 Parent/Guardian#2 Other (Explain) _____

List names, legal sex, and ages of your siblings, college (if any), degree(s), and dates of attendance.

Name	Legal Sex	Age	Institution	Degree(s)	Dates

ACADEMIC INFORMATION

School _____ CEEB Code _____

Type of school: Public Private Correspondence Charter Parochial Home-School Other/Education Provider

School Address _____
Number and Street

City/Town _____ State/Province _____ Country _____ Zip/Postal Code _____

Start Date _____ (mm/dd/yyyy) Date of Graduation _____ (mm/dd/yyyy)

Counselor's Name _____ Phone _____
Begin with Area or Country Code

Counselor's Email _____ Fax _____
Begin with Area or Country Code

Are you currently enrolled in school? Yes No Will/did you graduate from High School early? Yes No

Did you receive a GED? Yes No If so, list date: _____ (mm/dd/yyyy) (Please send official scores from testing agency)

If your education has been interrupted, please detail your activities since last enrolled. Please attach your response to the end of the application.

CURRENT YEAR'S COURSES

Please list name, level (Honors, AP, IB, etc.) and credit value of your current year's courses.

Semester #1/Trimester #1	Semester #2/Trimester #2	Trimester #3
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all other high schools, colleges/universities (including summers), and academic programs you attended, beginning with ninth grade. You must submit transcripts from each school.

OTHER HIGH SCHOOLS

School Name	CEEB Code	Dates Attended	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

COLLEGES/UNIVERSITIES

School Name	CEEB Code	Dates Attended	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AP/IB TEST SCORES

Please list any Advanced Placement or International Baccalaureate exams taken along with the test date and score.

Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score

Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score

STANDARDIZED TEST INFORMATION

List your test scores below. You must have the testing agency send official scores to each institution to which you are applying.

SAT Reasoning

Test Date	Evidence Based Reading & Writing	Math	Optional Essay
Test Date	Evidence Based Reading & Writing	Math	Optional Essay

Test Date	Evidence Based Reading & Writing	Math	Optional Essay
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SAT Subject

Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score

Test Date	Subject	Score
Test Date	Subject	Score
Test Date	Subject	Score

ACT

Test Date	English	Math	Reading	Science	Composite	Optional Essay
Test Date	English	Math	Reading	Science	Composite	Optional Essay
Test Date	English	Math	Reading	Science	Composite	Optional Essay

Test of English as a Foreign Language (TOEFL or other exam)

Test Date	Subject	Score
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Test Date	Subject	Score
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ACADEMIC DISTINCTIONS

Please list any academic or educational awards and honors you received in high school (e.g. National Merit, National Honor Society). Please attach your response to the end of the application.

EXTRACURRICULAR AND VOLUNTEER INFORMATION (including summer)

Please list any significant extracurricular or community activities and hobbies in which you have participated. Include specific accomplishments such as musical accolades, athletic distinctions, etc. (Please note: "PG" means Post-Graduate)

Activity	Grade Level	Specific Accomplishments	Hours/ Week	Weeks/ Year	Will you participate in college?
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

EMPLOYMENT INFORMATION

List any work experience (including summer jobs) during the past three years.

Employer	Job Description	Dates of Employment	Hours per week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- Are you a (check all that apply) Veteran Dependant of US Veteran Active US Military National Guard or Active Reserve
- If you are/were a part of the military, which branch (check all that apply) Army Navy Air Force Marines Coast Guard
- Are you planning to use Veteran Education Benefits? Yes No
- Were you honorably discharged from a branch of the US Military? Yes No (if no, please explain in additional information section)

ACTIVITY DESCRIPTION

Tell us more about one of your extracurricular, volunteer, or employment activities (100-150 words). If you need more space, please attach your response to the end of the application.

PERSONAL STATEMENT

Please write an essay (650 words or fewer) that demonstrates your ability to develop and communicate your thoughts. Some ideas include: a person you admire; a life-changing experience; or your viewpoint on a particular current event. Please attach your response to the end of your application.

MULTIMEDIA INFORMATION

Optional: You may provide your selected college(s) with a link to any online content you feel:

1. Tells the college more about yourself 2. Demonstrates a particular talent you possess 3. Highlights an activity in which you participated

Some ideas include linking to an online video you created, a portfolio (pictures or photographs), a musical composition, or a newspaper article.

http:// _____

Please briefly describe the contents of the link you provided.

ADDITIONAL INFORMATION

If you have additional information that was not specifically requested on the application or did not fit in the space provided, feel free to include it here. If you need more space, please attach your response to the end of the application.

DISCIPLINE INFORMATION

Have you ever been placed on probation, suspended, removed, dismissed or expelled from any school or academic program since 9th grade? Yes No

Other than traffic offenses, have you ever been convicted of any misdemeanor, felony, or other crime? Yes No

If you answered yes to either question, please provide an explanation and the approximate dates of each incident. Please attach your response to the end of the application.

AUTHORIZATION

Your signature below

1. authorizes all schools you attended to provide all requested records and allow review of your application for the admission process chosen on this application.

2. confirms all information in this application (including any supplemental information) is factually true and honestly presented and that you are the person submitting this application.

Signature of applicant _____

Date _____