

Mayville State University Undergraduate Application for Admission

Please Read All Directions Carefully

Please print in ink

Mail the Application for Admission and the \$35 non-refundable application fee directly to the Admission/Enrollment Services Office.

1. Have you previously applied for admission to Mayville State University? Yes No
2. Have you previously attended this college or university? Yes No If yes, list last date attended ____/____/____
3. Will you be registering for courses from more than one North Dakota University System institution? Yes No
4. Legal Name: _____

| | | | |
|------|-------|--------|------------------------|
| Last | First | Middle | Former (if applicable) |
|------|-------|--------|------------------------|
5. SOCIAL SECURITY NUMBER* _____ - _____ - _____
6. Gender*: Male Female
7. Your Birthdate ____/____/____ Place of Birth _____

| | | | | | | |
|-------|-----|------|------|-----------------------------|--------|----------------------|
| Month | Day | Year | City | State/Province/Municipality | County | Country (if not USA) |
|-------|-----|------|------|-----------------------------|--------|----------------------|
8. Are you a U.S. Citizen? Yes No If no, in which country do you hold citizenship? _____
9. If not a U.S. Citizen, are you a permanent resident? Yes No If yes, give alien registration number _____
10. Are you Hispanic/Latino? Yes No
11. Select one or more races: * American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White
12. Your Address _____

| | | | | |
|--------|-------|------|-------|----------|
| Street | Apt # | City | State | Zip Code |
|--------|-------|------|-------|----------|

| | | |
|--------|----------------------|----------------------------|
| | (____) | Your E-mail Address: _____ |
| County | Country (if not USA) | Telephone |

 Permanent Mailing Address _____

| | | | | |
|--------|-------|------|-------|----------|
| Street | Apt # | City | State | Zip Code |
|--------|-------|------|-------|----------|

| | | |
|--------|----------------------|-----------|
| | (____) | |
| County | Country (if not USA) | Telephone |
13. Mother/female guardian name: _____ Father/male guardian name: _____

| | |
|---------------|---------------|
| Address _____ | Address _____ |
| Street | Street |
| Apt # | Apt # |
| City | City |
| State | State |
| Zip Code | Zip Code |

| | | | |
|--------|----------------------|-----------|----------------------|
| | (____) | | (____) |
| County | Country (if not USA) | Telephone | Country (if not USA) |

 Email Address: _____ Email Address: _____
14. Check the option that best describes your current educational goal at this institution (keeping in mind that not all options are available at each institution):
 Earn a certificate/diploma (circle one) Earn a bachelor degree Complete courses but not a degree
 Earn an associate degree Complete undergraduate courses and transfer
15. Indicate delivery method/location through which you will be taking courses (check all that apply):
 On campus Online Off-campus site (indicate location): _____ Undecided
16. When do you plan to enter? Year _____ Fall Spring Summer
17. Indicate academic major/program: _____ Teaching degree: Yes No
18. List the last high school attended: _____

| | | | |
|-------------|------|-------|-----------------|
| High School | City | State | Graduation Date |
|-------------|------|-------|-----------------|

| | | |
|--|------------------------------------|-----------------|
| | GED (high school equivalency exam) | Completion Date |
|--|------------------------------------|-----------------|

* Disclosure of this information is voluntary. This information is requested for statistical purposes only and will not affect the status of your application. This information will not be used in a discriminatory manner. Failure to provide a Social Security Number may cause delays in administrative services such as financial aid processing and receiving federal tax information.

19. Indicate the completion date (if applicable) of the following exams: ACT _____ SAT _____
Month/Year Month/Year

20. List all colleges, universities, and schools attended, or currently enrolled, whether or not credits were earned. Include college credits earned while in high school.

Failure to list all colleges, universities, and schools previously attended may result in denial of admission, rescission of admission, dismissal, loss of credit(s), or other appropriate sanctions.

| NAME | LOCATION (City, State) | INCLUSIVE DATES OF ATTENDANCE | DEGREE(S) EARNED AND DATE |
|-------|------------------------|-------------------------------|---------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

21. Do you now or have you live(d) in North Dakota? Yes No If yes, list years (e.g. 1990-present or 1990-2009) _____
 If no, or not currently a ND resident, in what state are you a resident? _____ List years (e.g. 1997-present) _____
 If you have lived in ND less than one year, in what state did you most recently reside? _____ List years _____

22. Are you the spouse or a dependent of a graduate of a North Dakota public institution of higher education? Yes No
 If yes, which institution(s)? _____

23. Are you a Veteran of the Armed Services? Yes No

24. Are you a member of any of the following Armed Services? Army Navy Air Force Marines Coast Guard
 National Guard

If so, are you: Active Duty Reservist Veteran Dependent/Spouse

Required Additional Information

All students making application must answer the following questions. An affirmative response to any of these questions will not automatically prevent admission, but you will be asked to provide additional information. The information will be reviewed by a campus officer or committee charged with that responsibility. Falsification or omission of information may result in a denial of admission, rescission of admission, dismissal, or other appropriate sanction.

- 1) Have you ever pled guilty (or no contest) to or been convicted of any felony? Yes No
- 2) Within the past 10 years, have you pled guilty (or no contest) to or otherwise been convicted of a misdemeanor crime involving violence or the threat of violence in any court? ("Crime of violence" means an offense that involves substantial risk that physical force may be used against a person or property of another. Examples of crimes of violence include, but are not limited to, abuse, arson, assault [including sexual assault or domestic violence], battery, breaking and entering, burglary, criminal mischief or vandalism, harassment, homicide, menacing, reckless endangerment, stalking, terrorizing and unlawful restraint or imprisonment). Yes No
- 3) Are you currently required to register as a sex offender in any state? Yes No
- 4) Have you been dismissed or suspended from a college or university for disciplinary reasons within the last 5 years? ("Dismissed for disciplinary reasons" means a permanent separation from an institution due to conduct or behavior. "Suspended for disciplinary reasons" means a sanction imposed for disciplinary reasons that results in a student leaving school for a fixed period but not permanently.) Yes No

Go to <http://www.ndus.edu/uploads/ndus-policies/P511.pdf> to view the list of NDUS academic programs which require further criminal history background checks. These may include nationwide FBI criminal history background checks or a criminal history background check which may be a North Dakota BCI check, nationwide check or check of another state or multiple jurisdictions.

Required Signature

I understand the information presented on both sides of this form will be used in evaluating my application for admission to Mayville State University. I certify that all statements are complete and true as of this date. If this information changes, I will notify the Admission/Enrollment Services Office of the changes and understand that my admission status will be reevaluated at that time.

Signature of Student: _____ Date: _____



International Supplemental Form

Personal Information

Legal Name LAST FIRST MIDDLE FORMER NAME IF APPLICABLE

Mailing Address STREET APT. # CITY STATE ZIP/ POSTAL CODE COUNTRY

Email Address Telephone HOME CELL

For which visa will you be applying? F-1 J-1

Citizenship Information

Have you ever lived in the U.S.? Yes No

If yes, please relate the circumstances of your visit (e.g., visa type, date of visit, etc.)

Are you a permanent resident? Yes No

If you are already in the United States, what is your visa classification?

What is your native Language?

What other languages do you read, write or speak?

How long have you studied English? How long have you studied using English?

English Test

Have you taken the Test of English as a Foreign Language (TOEFL)? Yes No

Have you taken the International English Language Testing System (IELTS)? Yes No

If yes, have you had the results sent to us? Yes No

Date TOEFL taken - Date Score Date IELTS taken - Date Score

Additional Information

On an attached sheet of paper, state briefly your reasons for wishing to study at Mayville State University. Please add any information you feel is relevant to this application. Please limit to 200 words.

Applicant Authorization

All applicants must enclose original or officially certified documents for all education beginning with secondary education with certified translation to English.

I certify that the information supplied by me on this application is true and correct to the best of my knowledge.

Applicant Signature Date MM/DD/YYYY

Application Requirements

A completed application includes:

- * Admissions Application
* International Supplemental Questions
* Official academic transcripts
* \$100 Administrative Processing Fee
* Official TOEFL or IELTS Scores
* \$35 USD Application Fee
* \$100 SEVIS I-20 Fee
* Financial Certification Statement with supporting documents
* Verification of Measles, Mumps, Rubella, (MMR) Immunization