

# North Dakota University System Application for Admission

## Please Read All Directions Carefully

Please type or print in Ink

Mail the Application for Admission and the \$35 non-refundable application fee directly to the Admission/Enrollment Services Office at the college/university to which you are applying. Be sure to check with the individual campus(es) to which you are applying regarding submission of academic requirements.

To which college or university within the North Dakota University System are you applying? \_\_\_\_\_  
 Have you previously applied for admission to this college or university?  Yes  No  
 Have you previously attended that college or university?  Yes  No If yes, list last date attended \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Will you be registering for courses from more than one North Dakota University System Institution?  Yes  No

1. Legal Name: \_\_\_\_\_  
Last First Middle Former (if applicable)

2. SOCIAL SECURITY NUMBER\*\* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ 3. Gender \*  Male  Female

4. Your Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year City State County Country (if not USA)

5. Are you a U.S. Citizen?  Yes  No If no, in which country do you hold citizenship? \_\_\_\_\_

6. If not a U.S. Citizen, are you a permanent resident?  Yes  No If yes, give alien registration number \_\_\_\_\_

7a. Are you Hispanic/Latino?  Yes  No (U.S. Department of Education Requirement)

7b. Select one or more races:  American Indian or Alaska Native  Asian  Black or African American  
 Native Hawaiian or Other Pacific Islander  White

8. Your Mailing Address \_\_\_\_\_  
Street Apt# City State Zip Code  
 \_\_\_\_\_  
County Country (if not USA) Telephone Your E-Mail Address \_\_\_\_\_

9. Permanent or Parent Address \_\_\_\_\_  
Street Apt# City State Zip Code  
 \_\_\_\_\_  
County Country (if not USA) Telephone Parent/Guardian E-Mail Address \_\_\_\_\_

10. Term you plan to enter: 20\_\_ (check one)  Fall  Spring  Summer  Other (explain) \_\_\_\_\_

11. Check the option that best describes your current educational goal: NOTE- Not all options are available at all campuses

- Complete courses but not a degree  Earn Associate degree  Earn Associate degree and then transfer  
 Earn a Certificate/diploma (circle one)  Complete courses and transfer  Earn a bachelor's degree

12. Indicate Academic Major: \_\_\_\_\_ Teaching degree:  Yes  No If undecided on major, check here

13. Indicate delivery method/location through which you will be taking courses:

On campus  Online  Both on campus and online  Off-campus site (indicate location): \_\_\_\_\_

14. Do you intend to be:  Full time (12 or more credits)  Part time (fewer than 12 credits)

15. List the last high school attended:

\_\_\_\_\_ High School City State Graduation Date

\_\_\_\_\_ GED (high school equivalency exam) Completion Date

16. Have you attended or are you currently enrolled in any other colleges or universities? Yes  No

List all colleges, universities, and schools attended, whether or not credit was 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, recision of admission, dismissal, loss of credit(s), or other appropriate sanctions.

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

