



TEXAS COMMON APPLICATION



Fall 2008 U.S. Graduate Admission to The University of North Texas

BIOGRAPHICAL INFORMATION

1. U.S. Social Security Number: - -

(Enter your Social Security number (optional). Providing your social security number on this form is not required by a specific legal authority; however, it is important for purposes of the identity of your application, grade transcript and test scores. NOTE: If you plan to apply for financial aid or work while enrolled, you are strongly encouraged to list your official Social Security Number.)

2. Date of Birth: Month: Day: 4-digit Year:

3. Full, Legal Name:

Last/Family First Middle Suffix (Jr., etc)

4. Other names which may appear on academic records:

Last/Family First Middle Suffix (Jr., etc)

5. Gender: Male Female

6. Place of Birth:

City State/Possession (if born in U.S.)

Country (if NOT born in U.S.)

7. Permanent Address:

(Enter the address only, you do NOT need to re-enter your name)

Street Address:

City:
County (Texas Residents Only):
State/Possession: Zip: -
Country (Other than U.S.):
Permanent Phone: () -

8. Current Address:

(If your Current Address is the same as your Permanent Address, leave this question blank)

Street Address:

City:

County (Texas Residents Only):

State/Possession: Zip: -

Country (Other than U.S.):

Current Phone (if different from permanent phone): () -

Current Address Good Until: Month: Day: 4-digit Year:

Emergency Contact:

Name:

Street Address:

Apartment:

City:

State: if in US

Country: if not in US

Postal or Zip Code:

Phone:

10. E-Mail address for student:

Note: The email address provided may be used to communicate important information to you regarding your application.

EDUCATIONAL INFORMATION

Enter any specific area of interest or specialty within your major: (if applicable)

Degree you will seek:



Master's



Doctoral



Nondegree Graduate Student



Professional (Law, Optometry, Pharmacy, Medicine, etc.)

Are you a former University of North Texas student? No Yes

Institution Presently Attending: (if applicable)

Name of Institution:

Semester/Year Presently Attending: /

List courses to be completed during the present semester. If you will complete an additional term before enrolling at University of North Texas, list those courses also. If you need to list more than 6 courses, please send a list directly to the appropriate admissions office at University of North Texas. Be sure to include your full name, social security or student ID number, and application ID number on any documents you send to the admissions office.

Course Name	Credit Hours
<input type="text"/>	<input type="text"/> . <input type="text"/>
<input type="text"/>	<input type="text"/> . <input type="text"/>
<input type="text"/>	<input type="text"/> . <input type="text"/>
<input type="text"/>	<input type="text"/> . <input type="text"/>
<input type="text"/>	<input type="text"/> . <input type="text"/>
<input type="text"/>	<input type="text"/> . <input type="text"/>

SELF REPORT OF UNDERGRADUATE AND GRADUATE GPA:

Give number (not hours) of A's, B's, C's, etc. in all junior- and senior-level undergraduate work.

A's	B's	C's	D's and F's
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Jr. - Sr. Undergraduate GPA (see instructions below): .

Give number (not hours) of A's, B's, C's, etc. in all graduate level work.

A's	B's	C's	D's and F's
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Graduate GPA (see instructions below): .

GPA CALCULATION: Calculate your grade point average for all undergraduate and graduate work as follows: Take the total number of credit hours of A's and multiply by 4, multiply the number of credit hours of B's by 3, C's by 2, D's by 1 and F's by 0. Add these sums and divide by the total number of credit hours of A's, B's, C's, etc. Ignore plusses and minuses. Example: 9 credit hours of A's x 4 = 36; 2 credit hours of B's x 3 = 6; 1 credit hour of C's x 2 = 2; 44 divided by 12 credit hours = 3.66 GPA.

TEST SCORE 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.)

Check the box next to the test you have taken or will take:

GRE: Graduate Record Examinations General Test

When did you or will you take this test?

Month: 4 digit Year:

When did or will you request your GRE scores be sent to The University of North Texas?

Month: 4 digit Year:

Test Score(s):

Verbal Quantitative

Analytical Analytical Writing .

Please list ALL colleges or universities you have attended or are attending currently, including extension, correspondence, and distance learning credit. Failure to list all colleges will be considered an intentional omission and may lead to forced withdrawal.

Name of Institution:			
College Code:		<input type="text"/>	
City or Country:		<input type="text"/>	State (if applicable): <input type="text"/>
Dates of Attendance: From:		Month: <input type="text"/>	4-digit Year: <input type="text"/>
To:		Month: <input type="text"/>	4-digit Year: <input type="text"/>
Hours Earned:		<input type="text"/>	<input type="text"/>
(Note: Enter whole numbers in the left hand box and fractions in the right hand box. Do not enter a decimal point.)			
or	Degree & Major Earned/Expected: (example: BA History)	<input type="text"/>	
		Date: Month: <input type="text"/>	4-digit Year: <input type="text"/>
Degree Type:		<input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Law or Medical <input type="checkbox"/> No degree earned	

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City or Country:		<input type="text"/>	State (if applicable): <input type="text"/>
Dates of Attendance: From:		Month: <input type="text"/>	4-digit Year: <input type="text"/>
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Hours Earned:	<input type="text"/> <input type="text"/> <small>(Note: Enter whole numbers in the left hand box and fractions in the right hand box. Do not enter a decimal point.)</small>
Degree & Major Earned/Expected: <small>(example: BA History)</small>	<input type="text"/>

	Date: Month: <input type="text"/> 4-digit Year: <input type="text"/>
Degree Type: <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Law or Medical <input checked="" type="checkbox"/> No degree earned	

Will you have a bachelor's degree by the time you plan to enroll?

Yes No

Granting Institution:

City:

State:

Country (If not U.S.):

Date conferred: Month: 4-digit year:

Are you currently on academic suspension from a college or university?

Yes No

Are you a member of Phi Theta Kappa? Yes No

RESIDENCY INFORMATION (Please answer all questions which apply to you.)

(a) Are you a U.S. Citizen? Yes No

If no, of what country are you a citizen?

(b) If you are not a citizen, do you hold Permanent Residence status (valid I-551) for the U.S.?

Yes No Reset this answer

If yes, date permanent resident card issued:

Month: Day: 4-digit Year:

Permanent Resident Card Number:

Note: please submit a copy of both sides of the card.

(c) 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 Bureau of Citizenship and Immigration Services (BCIS)?

Yes No (If "Yes," please submit a copy of your notice of action or receipt from the BCIS.)

(d) If you are not a citizen or permanent resident or have no application pending with the BCIS, have you lived in Texas for three years preceding high school graduation or receipt of a GED in Texas and lived part of the time while attending high school with a parent or court-appointed legal guardian?

Yes No

(If "Yes", please submit a completed [Affidavit of Intent to Become a Permanent Resident.](#))

(a) Are you a resident of Texas?

Yes No

(b) If NO, of what state are you a resident?

(If you are not a resident of Texas, skip to the next section.)

If you are claiming Texas residency:

(a) How long have you resided in Texas? Years and Months

(b) Previous state or country of residence:

State:

or Country (Not U.S.):

(c) If you came here within the past five years, why did you move to Texas?

Education Employment

Military Assignment

Other (explain)

(d) Are you currently on active military duty assignment in Texas? (if yes, submit proof.)

Yes No

(e) What state is your home of record with the U. S. Armed Forces?

State:

EMPLOYMENT HISTORY:

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 an employer listed is not in the US, fill in "City" and leave "State" blank. If you are currently employed, put the current month and year in the "To" section.

Current or most recent Employer:

Name of Employer

City

State

Work Phone: () - May we contact you at work?

Work Fax: () - No

Work Email:

Job Category:

Industry Category:

From To
(Month Year) (Month Year) Type of Work/Job Title

Other Employers:

Name of Employer

City

State

From To
(Month Year) (Month Year) Type of Work/Job Title

Name of Employer

City

State

From To

(Month Year)

(Month Year)

Type of Work/Job Title

Name of Employer

City

State

From To

(Month Year)

(Month Year)

Type of Work/Job Title

List the individuals you have asked to recommend you.
If address is foreign, select "Country" and leave "State" blank.

Name Position

Address

City State Postal Code

Country (if not US address)

Name Position

Address

City State Postal Code

Country (if not US address)

Name Position

Address

City State Postal Code

Country (if not US address)

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 social security or student ID number and web application ID number directly to the graduate admissions office at University of North Texas.

Designation

Grantor

Date (month/year) In Recognition Of

Designation

Grantor

Date (month/year) In Recognition Of

Designation

Grantor

Date (month/year) In Recognition Of

Enter Parents' Educational Levels

Please specify the highest educational levels of your parents by marking one choice for father and one choice for mother. For the purpose of this survey, parents are defined as birth parents, adoptive parents, or legal guardians.

Father's Educational Level

- No high school
- Some high school
- High school diploma or equivalent
- Some college
- Bachelor's or four-year degree
- Graduate or professional degree
- Educational level unknown

Mother's Educational Level

- No high school
- Some high school
- High school diploma or equivalent
- Some college
- Bachelor's or four-year degree
- Graduate or professional degree
- Educational level unknown

Your high school information

Name of High School:

City or Country:

State (if applicable):

High School Code:

Grades Attended at this high school: 9 10 11 12

Graduation Date: Month: 4-digit Year:

If you did not graduate from high school, do you have a GED?

Yes No Not Applicable

If yes, which version: English Spanish Not Applicable

Background Verification

This question is **REQUIRED**

Have you ever been convicted of a criminal violation other than a minor traffic violation? If yes, this information will be forwarded to the Center for Student Rights and Responsibilities (CSRR). CSRR will mail you an Arrest Clearance Data Form for completion. You must complete the Arrest Clearance Data Form and return it to CSRR for clearance. Once clearance has been approved by CSRR, we will be able to process your application for admissions.

Yes

No

CERTIFICATION OF INFORMATION

You are required to read the statement below. By checking the box next to the statement you are agreeing to the terms and conditions laid out in the statement. If you do not check the box next to the statement, you will not be allowed to complete or submit this application.

I certify that the information I have provided is complete and correct to the best of my knowledge. I also certify that I have read and understand the ['Important Information about Bacterial Meningitis'](#) ([Click here to review the information.](#)). If my application is accepted, I agree to abide by the policies, rules and regulations at any university to which I am admitted. I authorize the university to verify the information I have provided. I further understand that this information will be relied upon by the officials of the university in determining my admission and residence status for tuition purposes and that the submission of false information is grounds for rejection of my application, withdrawal of an offer of acceptance, cancellation of enrollment, and/or disciplinary action. I also authorize the university to electronically access my records regarding the Texas Success Initiative.

APPLICATION FEE INFORMATION:

Your application fee for the **Fall 2008 semester** is \$ **50.00**.

Credit card:

What credit card are you using?

MasterCard

Visa

AMEX

Discover

Account Number: (numbers only, no spaces and no '-')

Expiration Date: Month: 4-digit year:

Name of Cardholder:

Billing Address:

Address Line 1

Address Line 2

City State Zip

Country
