

Returning Student - Previously taken Graduate credits

Deferring Admissions - Move starting term forward

Term of Intended Return to MSU Billings: Fall Spring Summer Year: _____

Personal Information

Student ID (or last 4 of SSN)	Last Name	First Name	Middle Name	Previous Name(s)	
Mailing Address		City		State	Zip
Permanent Address		City		State	Zip
Email Address	Cell Phone	Home Phone	Birth Date	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	

Ethnicity information is for statistical analysis only. It is not used in the admission process and will have no bearing on your admission status.

Indicate your ethnic identity:

 Hispanic / Latino

 Not Hispanic or Latino

If not Hispanic or Latino, indicate which of one or more racial categories should be used to classify you:

 American Indian or Alaska Native Specify primary tribal affiliation or reservation: _____

 Asian Specify country of origin: _____

 African American

 Native Hawaiian or Other Pacific Islander Specify country of origin: _____

 White

Educational Information

Proposed major upon returning to MSU Billings: _____ Degree: _____

Previous dates of attendance at MSU Billings/EMC/BVTC: _____

List all post-secondary institutions attended since last attending MSU Billings. Contact all institutions and request an official transcript be sent to the MSU Billings Graduate Admissions Office.

Name of College or University	City	State	Attendance Dates (to - from)	Degrees/Credits Earned

Residency Classification

 Are you a US citizen? Yes No

 If not US, are you a permanent resident alien of the US? Yes No

 Have you lived in Montana for the past 12 continuous months? Yes No

 Are you a resident of Montana? Yes No

If you are not a resident of Montana, in which state do you claim residency? _____

 Do you file Montana taxes? Yes No

Year of most recent Montana tax filing: _____

 If you own a vehicle, is it registered in Montana? Yes No

 Do you have a MT Drivers License or State ID? Yes No

Date of Issue: _____

Safety and Security

 Have you ever been convicted of a felony (please include instances of deferred sentencing)? Yes No

 Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property? Yes No

 Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons? Yes No

 Have you ever been required to register as a sexual or violent offender? Yes No

I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal. If my application for admission is approved, I agree to abide by the present and future rules and regulations, both academic and nonacademic, and the scholastic standards of the appropriate institution, its colleges, schools, departments and institutes, including but not limited to those rules, regulations and standards stated in both the undergraduate and graduate catalogs. I further acknowledge that if I fail to adhere to these regulations or meet these requirements, my registration may be canceled.

Internal Use Only

Signature _____

Date _____

Processed by: _____

Date: _____

Internal Use Only

Department Chair Signature _____

Date _____

Advisor Assigned _____