

**COLLEGE OF EDUCATION**  
**APPLICATION FOR ADMISSION TO THE UNIVERSITY OF COLORADO**  
 1420 Austin Bluffs Parkway, Colorado Springs, CO 80918

**Undergraduate:** Current Major: BA/BS \_\_\_\_\_

**Post Baccalaureate**

**TELP Licensure:** **Elementary**    **Secondary**    (please select **Secondary** concentration): English    Social Science    Spanish

**UCCS Teach:** (please select concentration): Math    Science

**SPED Licensure**

Select the semester and indicate year of expected enrollment

Fall    Spring    Summer    Year \_\_\_\_\_

**New UCCS Student?    Yes                      No**

CLASSIFICATION:    **Licensure (TCRT-LICU)**    **SPED**    **\$50 application fee** (Application fee is nonrefundable)

PERSONAL INFORMATION

**TYPE OR PRINT ALL INFORMATION:** Answer all questions completely. Attach additional sheets if necessary.

Full legal name: \_\_\_\_\_  
 (Do not use nickname)                      Last                      First                      Middle                      Other names which may appear on your academic records.

Social Security No. \_\_\_\_\_    Male    Female    Former CU Student # \_\_\_\_\_

Birthdate \_\_\_\_\_    Present Age \_\_\_\_\_    Home Phone \_\_\_\_\_    Email Address: \_\_\_\_\_

No. & St. or P.O. Box \_\_\_\_\_    Cell Phone \_\_\_\_\_    Permanent Address (if different): \_\_\_\_\_

City \_\_\_\_\_    Work Phone \_\_\_\_\_    No & Street or P.O. Box \_\_\_\_\_

State \_\_\_\_\_    Zip \_\_\_\_\_    City \_\_\_\_\_    State \_\_\_\_\_    Zip Code \_\_\_\_\_

**Nation of Citizenship** \_\_\_\_\_    If not a U.S. citizen, what type of visa do you have? \_\_\_\_\_  
**Please attach photocopy**

If you are a permanent resident (immigrant), please attach a photocopy of your alien registration card.

**The following Selective Service question must be answered to comply with Colorado State law:**

If you are a male between the ages of 17 years and 9 months and 26 years, are you registered with the Selective Service?    Yes    No

Under requirements of the US Department of Education, ethnic information must be collected and reported by collegiate institutions. This information is not used in the admissions decision. Please select one:

Nonresident Alien (International)    Hispanic    American Indian/Alaskan Native    Asian/ Pacific Islander  
 Black, non-Hispanic    Caucasian/White, non-Hispanic    Race/Ethnicity unknown

EDUCATIONAL EXPERIENCE

**List last high school and all colleges attended.** Failure to provide complete information may result in delay in admission, loss of transfer credit, and/or dismissal. Include correspondence and extension courses. **Transcripts, when provided, must come from each issuing institution directly to the University of Colorado.**

High School \_\_\_\_\_  
 (Currently attending or last attended)    Name    City    State    Zip Code

Highest grade completed (1 through 12) \_\_\_\_\_    Date of High School graduation \_\_\_\_\_ / \_\_\_\_\_  
 Indicate when you took or plan to take college entrance exam: ACT (month/year) \_\_\_\_\_ / \_\_\_\_\_    SAT (month/year) \_\_\_\_\_ / \_\_\_\_\_

If not a high school graduate, have you earned a state GED certificate?    Yes    No    **If "Yes", photocopy must be attached**

**List ALL colleges and universities attended, including University of Colorado campuses. Attach additional sheets if necessary.**

Name of Institutions (first to last)	City, State, Zip	Dates	Hours Completed	Degree Earned

I am eligible to return to all collegiate institutions previously attended: Yes No If no, please attach explanation.  
 I certify that I have a "C" or better cumulative average for all college work attempted: Yes No  
 Do you plan to apply for financial aid? Yes No

Emergency Contact Information:

Parent, Relative or Friend

Address	Last	First	Relationship	Phone
Number & Street	City		State	Zip

W O R K  E X P	Most Recent Work Experiences:					
	Type of Work	Employer	City, State	Zip	Dates	HRS Per WK
Other work experiences and/or statement if activities award and honors you have participated in or received may be submitted on a separate sheet.						

**COMPLETE THIS SECTION IF YOU ARE CLAIMING COLORADO IN-STATE TUITION CLASSIFICATION**

Failure to complete each question fully will result in your being classified as a nonresident. The information you provide will be kept confidential and is used solely to determine residency.

	You	Your Parent (If you are under 23)
Dates of continuous physical presence in Colorado (mo/yr) . . . . .	/ to /	/ to /
Date Colorado Driver's License was issued (mo/yr) . . . . .	_____	_____
Colorado Driver's License # . . . . .	_____	_____
Vehicle License # . . . . .	_____	_____
List exact years of Colorado Motor Vehicle registration (mo/yr) . . . . .	_____	_____
Date of Colorado Voter Registration (mo/yr) . . . . .	_____	_____
Date of purchase of any Colorado residential property (mo/yr) . . . . .	_____	_____
Dates of employment in Colorado (mo/yr) . . . . .	/ to /	/ to /
Dates of military service, if applicable (mo/yr) . . . . .	/ to /	/ to /
List all years Colorado income taxes have been filed . . . . .	_____	_____
* Date of marriage (mo/yr) - Answer this question if you will be under 23 by initial enrollment date . . . . .	_____	_____
If your parents are separated or divorced, which one lives in Colorado? . . . . .	_____	_____
Dates of extended absences (more than one month) from Colorado (mo/yr) . . . . .	/ to /	/ to /
Reason for absence	_____	

\* Response to this question is voluntary, will not affect the admission process, and is used only to determine residency status.

**Students who claim a change in tuition classification must petition the Office of Admissions and Records prior to registration.**

E D U C A T I O N  S T A T U S	I am not presently enrolled in high school or college, nor do I plan to enroll at another school prior to the term for which I am applying at the University of Colorado																				
	I am presently enrolled in high school or college and my last term there will be (select one): Fall Winter Spring Summer																				
	<b>Applicant:</b> Complete this section if currently enrolled in high school or college. List all course work not appearing on current transcripts but to be completed before intended enrollment. Order final transcripts to be sent when all work is completed.																				
	<table border="1"> <thead> <tr> <th>Name of High School or College</th> <th>Course Number &amp; Department</th> <th>Complete Course Title</th> <th>Credits</th> <th>Term &amp; Year</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	Name of High School or College	Course Number & Department	Complete Course Title	Credits	Term & Year	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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Select appropriate term system: Semester Quarter Trimester Other : _____																					

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**IMPORTANT: ALL APPLICANTS MUST ANSWER THE QUESTIONS BELOW AND SIGN THE APPLICATION**

1. Are you presently charged with or have you ever been convicted of a felony? Yes No  
If you answered "Yes" to the above question, please attach a statement of explanation.

2. Were you ever on scholastic probation or suspension in college? Yes No

I hereby certify that to the best of my knowledge the information furnished in this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for rejection or dismissal. I understand that if admitted as an unclassified student a maximum of 12 hours may be applied to an undergraduate degree or 9 hours MAY be applied to a graduate degree.

3. Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**COLLEGE OF EDUCATION OFFICIAL:** I have reviewed this student's record and attest that this student should be accepted and classified as TCRT-LICU OR SPED

Name (printed): \_\_\_\_\_

Signature of College of Education official: \_\_\_\_\_ Date: \_\_\_\_\_