

THINK.
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difference.

APPLICATION FOR
UNDERGRADUATE ADMISSION



ST. CLOUD STATE
UNIVERSITY

EDUCATION FOR LIFE.

HOW TO APPLY: THE BASICS

Whether you're planning to attend college for the first time or considering transferring from another college or university, we're excited that you're considering St. Cloud State. If you are ready to explore your passions, challenge yourself and take advantage of an exemplary education, we invite you to apply for admission.

To apply, complete a paper application and return it by mail by the appropriate deadline. Make sure to familiarize yourself with our deadlines in order to guarantee consideration, and remember that it's always best to apply early.

Transfer Students

Looking to finish the college education you've already started by transferring to St. Cloud State? Students are eligible for admission as transfer students if they have earned 24 or more college-level credits from a regionally accredited university or college-level institution. Applicants should have a cumulative GPA of 2.0 or higher. All credits earned with a "C" or higher are considered for credit transfer. Students with fewer than 24 transferable college-level credits will also need to provide their high school transcripts and ACT or SAT scores.

I am applying as a: Freshman Transfer

Office use only
Application review

_____ Date _____

_____ Date _____

_____ Date _____

Please print or type.

Name _____ Date of Application: ____ / ____ / ____
Last First Middle

Previous names used in high school records / collegiate transcripts if different from above (*Last, First, Middle name*)

Social Security No: - - E-mail address _____

Many institutions, including St. Cloud State University, request and use your social security number. While you are not legally required to provide your social security number on this form, you are strongly encouraged to do so. It will be used for routine record keeping, institutional statistics, research and required state and federal reporting.

Current Mailing Address _____
(House/Apartment Number, Street, P.O. Box/Rural route) City State Zip Code County

Permanent Address, if different from above _____
(House/Apartment Number, Street, P.O. Box/Rural route) City State Zip Code County

Permanent Phone () Current Phone ()

Of what state are you a resident? _____ Length of Residency _____ Birth country: _____

Are you a U.S. citizen? Yes No If not, type of VISA: _____

If you are a J-1 or F-1 visa holder, you must fill out the official international application, not this domestic application.
http://www.stcloudstate.edu/internationaladmissions/_files/documents/undergraduateApplication.pdf

Immigration status (if applicable): Resident Alien Refugee Asylum Other _____

ADMISSION INFORMATION

Have you decided on a major program of study? Yes No

If so, 1st choice: _____ 2nd choice: _____

Have you attended this University before? Yes No If yes, last date attended: _____

EDUCATIONAL INFORMATION

What term do you intend to begin taking courses? Fall semester Spring semester Summer session Year _____
(Check only one and indicate the year)

High school attended: _____
Name City State Zip Code

Do you have a high school diploma? Yes No High School Graduation date _____
If no, do you have a GED? Yes No Date received _____

Do you plan to attend: Full time Part time Degree seeking Non-degree seeking

COLLEGES/UNIVERSITIES ATTENDED

Have you earned college credits from any other post-secondary institution? Yes No Please indicate if you attended as a PSEO student. Please contact all schools attended to have official transcripts sent directly to SCSU from each college. Faxed transcripts are not accepted.*

College / University / Institute:	Name	City	State	Dates of Attendance	Degree/MNTC/PSEO
College / University / Institute:	Name	City	State	Dates of Attendance	Degree/MNTC/PSEO
College / University / Institute:	Name	City	State	Dates of Attendance	Degree/MNTC/PSEO

*Failure to list all schools attended is sufficient grounds to cancel admission.

List all institutions of higher education attended (even if you withdrew) including colleges, universities, vocational-technical schools, the institution you currently attend, name of college for courses taken while in high school, extension programs, etc., and any degree(s) earned. Attach additional pages if needed. Failure to list all institutions may result in disciplinary action, and/or denial of the admission decision.

MINNESOTA STATE UNIVERSITY SYSTEM PREPARATION STANDARDS FOR FRESHMAN APPLICANTS

Students graduating from high school in 1994 and beyond are subject to preparation requirements for admission. These requirements do not apply to transfer student admission. Please list coursework which will be/was completed by graduation from high school.

PLEASE FILL IN THE NUMBER OF YEARS COMPLETED IN EACH SUBJECT:

ENGLISH	TOTAL OF _____ YRS	SCIENCES		WORLD LANGUAGE	
		Biological sciences with lab yrs	_____	Spanish	_____ yrs
MATHEMATICS		Physical science with lab	_____ yrs	French	_____ yrs
Elementary algebra	_____ yrs	Physics with lab	_____ yrs	German	_____ yrs
Intermediate algebra	_____ yrs	Chemistry with lab	_____ yrs	Other	_____ yrs
Geometry	_____ yrs	Other with lab	_____ yrs		TOTAL OF _____ YRS
Trigonometry	_____ yrs		TOTAL OF _____ YRS		
Pre-Calculus	_____ yrs	SOCIAL STUDIES		ELECTIVES	
Other	_____ yrs	U.S. history	_____ yrs	World Culture	_____ yrs
TOTAL OF _____ YRS		Geography	_____ yrs	Music	_____ yrs
		Other	_____ yrs	Theatre / drama	_____ yrs
		TOTAL OF _____ YRS		Visual arts	_____ yrs
				Dance	_____ yrs
				Other	_____ yrs
				TOTAL OF _____ YRS	

TO BE COMPLETED BY HIGH SCHOOL OFFICIAL FOR FRESHMAN APPLICANT

Applicant ranks _____ (from top) in class of _____ students _____ percentile ACT composite score (w/o writing) _____ [or] SAT composite score _____

HIGH SCHOOL RANK Rank is based on academic record through junior year half of senior year senior year

Weighted rank: Applicant ranks _____ from the top in a class of _____ students

Unweighted rank: Applicant ranks _____ from the top in a class of _____ students

School does not rank.

Signature of certifying official _____ Title _____ Telephone number _____ Date _____

SUPPORTING INFORMATION (ALL APPLICANTS)

List school activities, community organizations, and volunteer work in which you participate. Attach a separate sheet if needed.

Name of Organization or Activity	Number of years of participation	Special Recognitions/Awards/Offices held

Are your parents graduates of St. Cloud State University? Yes No

If Yes, name(s) and year(s) of graduation _____

CONFIDENTIAL VOLUNTARY INFORMATION

The following information will help Minnesota State Colleges and Universities evaluate student recruitment and retention policies; it will not be used as a basis for admission. Providing this information is voluntary.

Gender: Male Female

Are you now serving, or have you ever served, in the United States armed forces? Yes No

Are you Latino/a (a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture, regardless of race)?

Yes No

Racial Background (select one or more)

- American Indian or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.
- Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent.
- Black or African American - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

What is the highest level of education for your parent(s)/guardian(s)?

Please respond for the parent(s), step-parent(s), adoptive parent(s) or guardian(s) who raised you. Check only one box for each parent/guardian.

Parent/Guardian #1

- No high school diploma High school diploma Some college Two-year college degree/diploma Bachelor's degree or higher
- Not sure/don't know

Parent/Guardian #2

- No high school diploma High school diploma Some college Two-year college degree/diploma Bachelor's degree or higher
- Not sure/don't know

SIGNATURE REQUIRED BY ALL APPLICANTS

I certify that the information given on this application is complete and correct to the best of my knowledge. I understand that I am responsible for the forwarding of official transcripts from schools I have attended, and that such transcripts become the property of St. Cloud State University and will not be returned. I understand that falsification of my records may be cause for St. Cloud State University to void either my admission or registration or take other appropriate action.

Signature _____ Date _____

ACCESS TO ADMISSION APPLICATION FILE

St. Cloud State University complies with federal and state privacy laws and regulations. Those who may gain access to information in your file are staff and faculty at SCSU who have a need to gain access, and outside organizations and government bodies in limited circumstances as authorized by state or federal law. In addition, you may receive your own file. No one else may view your file without your written consent or a subpoena or court order. If you want the University to give information to someone else such as your parent, spouse or other relative, or friend, you must complete and sign this section of the application. This consent will remain in effect for one year from the date you sign unless you advise the University earlier that you want to withdraw your consent. If you give someone else access to your file, that person may be able to help us process your application.

I authorize the following person(s) to receive information in my St. Cloud State University application file.

Name _____

Relation to me _____

Address _____
(House/Apartment Number, Street, P.O. Box/Rural route) City State Zip Code

Applicant's Signature _____ Date _____

Please return this section with your application.

Send application materials and official transcripts to:

Office of Records and Registration
118 Administrative Services Building
St. Cloud State University
720 Fourth Avenue South
St. Cloud, MN 56301-4498

