

University of Cincinnati **Admissions Application**

All information is required, except where noted. Mail all required admissions documents, including application fee to, Office of Admissions, University of Cincinnati, PO Box 210091, Cincinnati, OH 45221-0091. **Application fee is \$40* for students beginning in Winter (January 2010) and Spring (March 2010) terms and \$50* for students beginning in Summer (June 2010) and Fall (September 2010) terms.**



PLEASE PRINT CLEARLY

PERSONAL INFORMATION			
First name:	Middle name:	Last name (family name/surname):	Suffix (Jr, III, etc.):
Maiden or former last name:		Social Security Number (optional):	
Applicant's e-mail address:			
Parent's e-mail address (optional):			
Date of birth: MONTH DAY YEAR	Please indicate your ethnicity: <input type="radio"/> Hispanic/Latino <input type="radio"/> Not Hispanic/Latino	Select one or more of the following racial categories: <input type="radio"/> American Indian/Alaska Native <input type="radio"/> Asian <input type="radio"/> Black/African American <input type="radio"/> Native Hawaiian/Other Pacific Islander <input type="radio"/> White	
Gender: <input type="radio"/> Male <input type="radio"/> Female			
PERMANENT ADDRESS			
Street address:			
City:		State/Province:	Zip/postal code
Country:	Phone: ()	Cell phone: ()	
CURRENT ADDRESS (if different than permanent address)			
Street address:			
City:		State/Province:	Zip/postal code
Country:	Phone: ()	Cell phone: ()	
CITIZENSHIP			
Country of birth:	Country of citizenship:	(International students only) Are you a permanent resident of the U.S.? <input type="radio"/> Yes <input type="radio"/> No Anticipated visa type:	
EDUCATION PLANS			
I plan to attend UC: <input type="radio"/> Full-time <input type="radio"/> Part-time	Campus you plan to attend: <input type="radio"/> Uptown Campus <input type="radio"/> Clermont College <input type="radio"/> Raymond Walters	Enrollment term: <input type="radio"/> Fall <input type="radio"/> Winter <input type="radio"/> Spring <input type="radio"/> Summer Enrollment year:	Type of degree you are seeking: <input type="radio"/> Bachelor's degree (4- to 5-year program) <input type="radio"/> Associate degree (2-year program) <input type="radio"/> Non-degree, certificate program
First choice major:	Second choice major (optional):	Third choice major (optional):	
Career objective:			
Professional School Interest (optional) If you plan to pursue one of the following graduate careers after earning the degree you indicated, please check your interest(s) below so that you can be identified for appropriate advising: <input type="radio"/> Law <input type="radio"/> Dentistry <input type="radio"/> Medicine <input type="radio"/> Optometry <input type="radio"/> Veterinary Medicine			
HIGH SCHOOL INFORMATION			
High school name:	City:	State:	CEEB code (optional):
Graduation date or expected graduation date:			
Were you home schooled during your high school or secondary education? <input type="radio"/> Yes <input type="radio"/> No			

* Application Fee is non-refundable

OVER, PLEASE

COLLEGE INFORMATION

Have you attended college or taken any college-level courses?

 Yes No

College name:

City:

State/province:

Dates of attendance

From: _____ To: _____

Degree earned:

Degree date:

College name:

City:

State/province:

Dates of attendance

From: _____ To: _____

Degree earned:

Degree date:

College name:

City:

State/province:

Dates of attendance

From: _____ To: _____

Degree earned:

Degree date:

CURRENT COURSES

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

Course name:

Course type:

 High school College

Term type:

 Quarter Semester

Course credits:

SUPPLEMENTAL INFORMATIONAre you a University of Cincinnati employee or dependent? Yes No*(Please note, the information from the following questions is used for possible scholarship invitation and has no bearing on admission.)*Highest school your father completed: Middle school/Jr. high High school College or beyond Other/unknownHighest school your mother completed: Middle school/Jr. high High school College or beyond Other/unknownAre you the child or grandchild of a University of Cincinnati alumnus? Yes No**PERSONAL STATEMENTS**

All first-time college students applying to bachelor's degree (4- or 5-year) programs are required to submit a personal statement and a list of co-curricular activities. **This is an important component of your application as the University of Cincinnati uses this information, in addition to academic criteria, for admissions decisions and the awarding of scholarships.**

Using a separate sheet(s) of paper, please provide your responses to the following items:

- **Personal Statement:** Please provide a Personal Statement regarding how your academic achievements, personal interests, and life experiences have helped prepare you to succeed academically and to be an active member of the UC community. **Be sure your response addresses each of the three components.** *(Please limit your response to approximately 250 words.)*
- **Co-curricular Activities:** Please list your principal activities outside the classroom (student organizations, sports, community service, work, etc.). Include a brief description of your role or distinguishing contributions for each activity.

SIGNATURE

I certify that the information given in this application is true and correct to the best of my knowledge and that the personal statements are my own work. I understand that submission of incomplete or inaccurate information, misrepresentation or plagiarism may be cause for rescinding my admission, financial aid, and/or scholarship offers, or suspension from the university if discovered subsequently. I understand that this application will not be complete until UC has received my final, official high school transcript upon graduation (or my official, satisfactory G.E.D. test result) and, if I am a transfer applicant, all final, official post-secondary transcripts.

Signature:

Date:

Mailing address: Office of Admissions
University of Cincinnati
PO Box 210091
Cincinnati, OH 45221-0091

Delivery address: University of Cincinnati
Office of Admissions
2624 Clifton Avenue
340 University Pavilion (ML 0091)
Cincinnati, OH 45221-0091
513-556-1100