

Today's Date: \_\_\_\_\_

# University of Colorado at Boulder

## Office of Admissions

Welcome to CU-Boulder! Please take a few minutes to fill out the information below.

<i>Prospective student information (please print):</i>			
Name	_____	Date of birth:	____ / ____ / ____
Address	_____		
City	_____	State	_____ Zip Code _____
Phone	( _____ ) _____	Social Security Number	_____ - _____ - _____
Check one:	_____ United States Citizen	_____ Permanent Resident	_____ Foreign Student
Ethnicity (Optional):	_____ African American/Black	_____ Hispanic/Latino	
	_____ American Indian	_____ Caucasian	
	_____ Asian/Pacific Islander	_____ Other:	_____

I am (check one):

- \_\_\_\_\_ A prospective new Freshman
- \_\_\_\_\_ A prospective Transfer student
- \_\_\_\_\_ Returning to CU-Boulder  
*(former CU-Boulder degree students only)*

I am interested in enrolling for (check one):

- \_\_\_\_\_ Fall Year: \_\_\_\_\_
- \_\_\_\_\_ Summer Year: \_\_\_\_\_
- \_\_\_\_\_ Spring Year: \_\_\_\_\_

My intended major is \_\_\_\_\_  
*(please list specific major or undecided)*

High School	_____	Graduation Date	_____ / _____
City/State	_____	High School GPA	_____
Colleges Attended (Transfer Students)	Dates of Attendance	# of Credits	GPA
_____	To _____	_____	_____
_____	To _____	_____	_____
_____	To _____	_____	_____
_____	To _____	_____	_____

Please list specific topics that you wish to cover during your counseling session:

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Last name, first name, middle initial;      social security number      hold in pending until    month/year

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Counselor name: \_\_\_\_\_ response code \_\_\_\_\_ date: \_\_\_\_\_

**COUNSELING COMMENTS:**