

1. Full Legal Name: _____

2. Social Security Number: _____ 3. Birth date: _____

4. Gender: Male Female

5. Ethnicity: Are you Hispanic, Chicano, Mexican, Latino, Cuban, Puerto Rican, or Central American, or of Spanish Origin? Yes No

Check one or more: American Indian or Alaskan Native Asian Black or African American
Native Hawaiian or Other Pacific Islander White

6. Citizenship: Indicate your country of citizenship. If you have dual citizenship and the U.S. is one of the countries, indicate U.S. Citizen." If the U.S. is not one of them, indicate the country that will issue your visa.

U.S. citizen

Permanent resident (immigrant)-Country of citizenship: _____

Alien registration number: _____ Date of issue: _____

Nonimmigrant on temporary status-Country of citizenship: _____

Type of visa you now hold or expect to obtain:

Student (F-1) Exchange Visitor (J-1) None Other (specify): _____

Immigration Number: _____

7. Address: _____

Number and Street or PO Box

City

State

Zip Code

Foreign Country (if applicable)

Telephone

8. E-mail Address: _____

9. Intended Major: _____

10. Term and Year of Intended Enrollment: Fall Spring Summer 20_____

11. Do you have a pending criminal charge OR have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction is annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential. Failure to answer this question will stop the processing of your application. If you answer yes, you will receive a supplement form by mail.

Yes No

12. Have you ever been placed on probation, suspended, expelled, or been subject to official disciplinary action from any high school or postsecondary institution for any academic misconduct or behavioral misconduct? Failure to answer this question will stop the processing of your application. If you answer yes, attach a written explanation including specific offense, length of suspension, date of occurrence and summary of disciplinary charges.

Yes No

13. Parent/Guardian Info: Name: _____

E-mail: _____

Using the code below, indicate on the lines provided the highest level of formal education attained by your parents or guardians.

Father: _____ Mother: _____

A-- Unknown B--Less than high school graduate C--High school graduate or equivalent D--Some college
E--Technical School F--2-yr. college degree G--Bachelor's level degree H--Some graduate school I--Master's level degree
J--Doctorate (academic) K--Doctorate (professional) L--Post-doctorate

14. Family members who have attended CU (Name, Relationship, Dates of Attendance):

Applicant Name: _____

15. High School Information. Official transcripts must be sent directly from the issuing institutions to the Office of Admissions:

Graduating High School Name	City	State	Zip Code
Dates of Attendance	Highest Grade completed	Graduation Date	

16. Post-Secondary Institutions: List *all* collegiate institutions you have attended (whether or not courses were completed, and whether or not you believe the record will affect your admission or transfer of credit). Attach an additional page if necessary. Official transcripts must be sent directly from the issuing institutions to the Office of Admissions:

a. _____

Institution Name	City	State	Zip Code
Degree/Date Earned	Type of System (semester, quarter, trimester, etc.)	# of Hours Completed	

b. _____

Institution Name	City	State	Zip Code
Degree/Date Earned	Type of System (semester, quarter, trimester, etc.)	# of Hours Completed	

c. _____

Institution Name	City	State	Zip Code
Degree/Date Earned	Type of System (semester, quarter, trimester, etc.)	# of Hours Completed	

17. List all in-progress courses (not currently posted on transcripts) that will be completed before the term for which you are applying. Attach an additional sheet if necessary:

a. _____

Complete Course Title	Course No. and Dept.	Credit Hours
Name of School or College	Term/Year	

b. _____

Complete Course Title	Course No. and Dept.	Credit Hours
Name of School or College	Term/Year	

c. _____

Complete Course Title	Course No. and Dept.	Credit Hours
Name of School or College	Term/Year	

d. _____

Complete Course Title	Course No. and Dept.	Credit Hours
Name of School or College	Term/Year	

e. _____

Complete Course Title	Course No. and Dept.	Credit Hours
Name of School or College	Term/Year	

18. I hereby certify that to the best of my knowledge the information in this supplemental application is true and complete. I understand that if found to be otherwise, it is sufficient cause for refusal or dismissal. In addition, I must notify the Office of Admissions if any information in this application changes after submission. I also agree to all terms and conditions as discussed in the application. I also understand that if I am admitted, my admission is contingent upon my final credentials reflecting academic achievement similar to the assessment at the time of my admission. If I enroll as a student at the University of Colorado Boulder, I agree to observe all campus policies and regulations including the Honor Code and acknowledge that I am responsible for all financial obligations incurred. I hereby consent to the release of my high school and college transcripts or any other materials relevant to an admission decision to the institution receiving this application.

Applicant's Signature: _____ Date: _____



If you are claiming in-state tuition, please fill out this form. In-state tuition eligibility requires one year of Colorado **domicile** (legal residence). Exceptions to the one-year requirement are provided for: Honorably-discharged members of the U.S. armed forces moving permanently to Colorado or certain dependents of Honorably-discharged members of the U.S. armed forces; active-duty military stationed in Colorado or certain dependents of active duty military; Colorado National Guard members; children of new faculty members at Colorado state-supported colleges; U.S. citizens or undocumented applicants who attended 3 years of high school in Colorado immediately prior to enrollment; and existing employees (and their children) of companies moving to Colorado with state economic incentives. Information about the Colorado resident/nonresident regulations, including details of these exceptions, is available at registrar.colorado.edu/students/tuition_classification_regulations.html.

Name (Last Name, First Name Middle Name)

Are you claiming eligibility for Colorado in-state tuition classification? "No" means you will be billed at the higher nonresident rate.
 YES NO

Will you be age 23 or older on the first day of class of the term for which you are applying? If NO, then you must complete the section on YOUR FAMILY. This section refers to your Parent or Court-appointed Guardian.
 YES NO

Enter date (mm/dd/yy) for From and To date. Enter Present for To date if ongoing. For dates more than 2 years past, month and year are sufficient.		
	Student Information:	Family Information: Parent Guardian
1. Current Address	_____	Name: _____ _____
2. Dates of continuous physical presence in Colorado	From: _____ To: _____	From: _____ To: _____
3. Dates of absences from Colorado of more than 2 months in the past 2 years. a. Please describe the circumstances of any such absence	From: _____ To: _____	From: _____ To: _____
4. Dates of employment in Colorado	From: _____ To: _____	From: _____ To: _____
5. List the years (for example 2006, 2007, 2008; 1990 through 2008, not the number of years) for which personal resident Colorado income tax returns were filed.	Year From: _____ Year To: _____ (if single year, list that year in the "from" and "to" boxes)	Year From: _____ Year To: _____ (if single year, list that year in the "from" and "to" boxes)
6. Are you registered to vote in the United States? a. State of Registration b. Date of Last Registration	Yes No State: _____ Date: _____	Yes No State: _____ Date: _____
7. Have you operated a motor vehicle in the past two years in Colorado?	Yes No	Yes No
8. Do you own, or do you have for your person use, a motor vehicle? a. State in which licensed b. Month and Year of Colorado motor vehicle registrations during the past two years. c. Colorado license plate number	Yes No State: _____ Month: _____ Year: _____ License Plate Number: _____	Yes No State: _____ Month: _____ Year: _____ License Plate Number: _____
9. Do you have a current driver's license or state-issued ID? a. State of issue b. Date of issue c. If Colorado, list driver's license or ID number d. Is this a renewal of a previously issued Colorado driver's license or ID?	Yes No State: _____ Date: _____ Number: _____ Yes No	Yes No State: _____ Date: _____ Number: _____ Yes No

Name (Last, First, Middle)

10. Do you own residential property in Colorado that is your primary residence? a. Date purchased b. Address c. Do you maintain a home in another state?	Yes No Date: _____ Address: _____ _____	Yes No Date: _____ Address: _____ _____
11. Have you ever served in the United States military? a. If so, list dates of service b. Dates stationed in Colorado c. Have you been on active military service during the past 2 years?	Yes No From: _____ To: _____ From: _____ To: _____ Yes No	Yes No From: _____ To: _____ From: _____ To: _____ Yes No
12. Have you attended a Colorado high school for at least 2 years? a. Did you, or will you, graduate from a Colorado high school?	Yes No Yes No	
13. Have you paid in-state tuition in a state other than Colorado by claiming residence in that state during the past 2 years? a. If yes, list colleges at which you paid in-state tuition	Yes No	Yes No
14. Date of student's marriage, if applicable. (Response to this question is voluntary, will not affect the admissions process, and is used only to determine residency status.)	Date: _____	
15. Provide any additional information regarding unusual circumstances you would like to have considered.		

I hereby certify that to the best of my knowledge, the information furnished above is true and complete.

Applicant Signature

Date

Mail Complete Form To:

University of Colorado Boulder
Office of Admissions
552 UCB
Boulder, CO 80309