

One University. A World of Experiences.

UNDERGRADUATE APPLICATION FOR ADMISSION

OFFICE OF ADMISSIONS FROSTBURG STATE UNIVERSITY 101 BRADDOCK ROAD FROSTBURG, MARYLAND 21532-2303 WWW.FROSTBURG.EDU

Application Procedures

For an online version of this application, go to: www.GoBobcats.frostburg.edu



Freshmen

There are two options for freshmen applicants to consider:

Early Action (non-binding) applicants are guaranteed a quick decision. If all required materials are received in the Admissions Office by November 15, Early Action applicants will receive an admissions decision within four weeks.

Regular Decision applicants are encouraged to apply by February 1 for priority consideration. Applications can be submitted after February 1 and are reviewed as they become complete.

Freshman Application Checklist:

- Complete the front and back of Part I, Application for Admission.
- □ Complete the Residency Application if you wish to be considered for in-state tuition rates.
- Submit an optional essay from questions included in this form.
- Complete Part II, the Application Fee Transmittal Form and attach your \$45 non-refundable application fee (or pay online at www.frostburg.edu/payonline).
- □ The Request for Academic Record, Part III, should be given to the guidance counselor or other appropriate official at your high school.
- Submit official high school transcripts. Students who have received a General Equivalency Diploma (GED) must forward their score report and an official high school transcript which indicates the last completed year in school.
- □ Scholastic Aptitude Tests (SAT I Reasoning) are required unless the freshman applicant graduated from high school a minimum of three years prior to their enrollment at FSU. The SAT code for FSU is 5402. Students who have not taken the SAT may submit ACT scores.

The University does not assume the responsibility of informing a student of the completeness of the application for admission. Please be sure that all forms included with this application are completed and signed. Please be sure that all required documents are provided as quickly as possible.

Transfer Students

Students who attended post-secondary institutions after graduating from high school are considered transfer students. Applicants for the Fall semester are encouraged to apply by June 1 prior to the semester start. Applications can be submitted after June 1 and are reviewed as they become complete.

Applicants for the Spring semester are encouraged to apply by December 1 prior to the semester start. Applications can be submitted after December 1 and are reviewed as they become complete.

Credits to be awarded for transfer are determined at the time of admission to Frostburg. Only college level courses completed at a regionally accredited institution will transfer provided the courses are similar in nature, content and scope to courses taught at FSU.

Transfer Application Checklist:

- Complete the front and back of Part I, Application for Admission.
- □ Complete the Residency Application if you wish to be considered for in-state tuition rates.
- Complete Part II, the Application Fee Transmittal Form and attach your \$45 non-refundable application fee (or pay online at www.frostburg.edu/payonline).
- Provide the Office of Admissions with official transcripts from each institution of higher education you have attended. If you are currently enrolled, an official transcript of your final grades must be submitted.
- □ If you have less than 24 transferable credits, you must also submit an official high school transcript and SAT scores to the Office of Admissions.

International Student Applicants

The admission requirements for international undergraduate students are available online at www.frostburg.edu

Re-entry Students

If you previously were admitted and attended the university but did not earn a degree and have been absent for one semester or more, you must submit an application for readmission. Please check the re-entry box on the classification section of the application form.

Special Students

Individuals applying to Frostburg State University who wish to take a few undergraduate courses but do not intend to seek a degree from FSU are deemed special students. If this is your intention, please check the appropriate box in the "Classification" section of this application. Please send a copy of your most recent transcript (high school or college).

Transcripts

Only official transcripts are acceptable. Official transcripts are those that include the school's seal and the signature of the appropriate official in a sealed envelope. High school and college transcripts should be sent directly from the school to the Frostburg State University Office of Admissions. Have all required documents mailed directly to:

OFFICE OF ADMISSIONS FROSTBURG STATE UNIVERSITY 101 BRADDOCK ROAD FROSTBURG, MARYLAND 21532-2303

Electronic transcripts can also be submitted directly from high schools or colleges with this capability.

Social Security Number

A social security number (or tax identification number) is not required to apply; however, it is required for financial aid processing and to process federal tax documents. The university is required to submit a 1098T tax form to the IRS for each tax year that an enrolled student is eligible. This is a voluntary disclosure, however, should a student choose to not submit a valid SSN or ITIN for tax reporting, the IRS may impose a fine on the student.

Ethnicity and Race Definitions

The standard Federal Government ethnicity and racial definitions are described below.

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American: A person having origins in any of the black racial groups of Africa.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains cultural identification through tribal affiliation or community attachment.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.



OFFICE OF ADMISSIONS FROSTBURG STATE UNIVERSITY 101 BRADDOCK ROAD FROSTBURG, MARYLAND 21532-2303 301.687.4201 FAX: 301.687.7074

Application for Admission

Please read Application Procedures first. Please read and follow all instructions carefully. Print legibly. Answer all questions.

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|--|-----------------------------------|------------------------------|------------------|----------------------|---|-------------------------|------------|------------|----------|--------|-------------------------------------|---|-----------|-----------------|----------|-------|------|-------|-------|-------|----------|--------|---------|--------|---------|------|-------|--|
| Last Name (legal name) | | | | | Middle Name Other Last Name (Maiden Name) | | | | | | ne) | | | | | | | | | | | | | | | | | |
| Gender: (optior | nal) 🗆 N | lale 🗆 | Femal | le | Birth I | Date Mo | onth: | C |)ay: | | Year: | S | ocial Se | curity | y Numl | ber | | | | | | | | | | | | |
| Permanent Home Address | | | | | | | City | City State | | | | | | te | | | | Zip |) | | | | | | | | | |
| County | | | | | Length | of Resid | ency | | | | Home Phone Number Cell Phone Number | | | | | | ber | | | | <u> </u> | May v | ve tex | t you? | | | | |
| Years: Months: (| | | | | | (| | | | | | | | | | | | Ye | | No | | | | | | | | |
| E-mail Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parent/Guardian/Spouse Name (please circle relationship) | | | | | | | | Address | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | State | | Zip | | | Phone Number () | | | | | | | | | | | | | | | | |
| Colleges and uni national surveys not used to dete | , to describe t rmine eligibil | he racial an ity for admi | d ethn ssion. | nic backg You sho | rounds o uld answ | f our stuc er both q | ents. Th | is inform | | | | Citizenship: Native Language: U.S. English Other Country Other | | | | | | | | | | | | | | | | |
| Are you of Hisp | | | | | | | | | | | lfno | n-U.S | . citizeı | 1, curre | entvisa | type_ | | | | | _ | | | | specify | | | |
| What is your ra | ce? Select o | ne or more | of the f | | 5 5 | | Alacka N | ativo | | | | | citizens | | | | | | | | - T(| DEFL | Date _ | | | | | |
| Black or Africa | an American | | | | merican l ative Hav | | | | nder | | | | | | | | | | | | IE | LTS D | ate _ | | | | | |
| □Asian | | | | | | | | | | | | | residen | | | | | | | | - | | | | | | | |
| The standard Federa | ıl Government e | thnicity and r | acial de | efinitions a | are describe | ed in the Ap | oplication | Procedure | es secti | ion. | Country of birth | | | | | | | | | | | | | | | | | |
| Academ | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School/Co | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transfer Stude Name | nts: II curren | liy enrolled | at ano | other coll | ege, piea | se allacr | a list of | courses | in pro | ogress | U | Date of Initial Attendance Date Attendance Ended Diploma or (Month/Year) (Month/Year) Degrees Earned Graduation Date | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | nonth | / 1001) | | | (100 | | cai) | | | | eyie | | neu | | | lauua | |
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| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please account f | or activities | during an | y laps | e of tim | ne when | you wei | e not al | ttendin | g eitl | her hi | igh scho | ol or c | ollege | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Classification | | | | | Type of degree sought: B.A. B.S. B.F.A. B.S.N. Semester you wish to enroll at FSU: Fall Spring Year | | | | | | | | | | | | | | | | | | | | | | | |
| Intended majo | | • | nco c | tion on | 0000 6 af | thic form | 1 | | | | Have | you a | pplied | to FS | ou peto | re? | Ц | NO L | ⊥ Yes | s Ity | es, pl | ease g | give se | emest | er and | year | | |
| intended majo | r (see list on i | SU AT A GIA | nce sec | tion on p | oage 6 of 1 | tnis torm, | | | | | | | | | | | | | | | | | | | | | | |
| Which campus | will you be a | attending | |] Frostb | urg | | | | | | Tort | take | n: List | lator | on which | hvor | have | takor | 01 25 | nlar | ninat | o tak | a tha | follow | vina to | ctc• | | |
| See FSU At A Glan | | | | | | transfer s | tudents d | at these | locatio | ons: | | | | | | | | | | • | 5 | | | | 5 | | | |
| USM-Hagers | | ☐ Arundel | | | Cecil | | D On | | | | SAT Date(s) | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | ACT Date(s) | | | | | | | | | | | | | | | | | |
| ATB Option: specify ATB community college | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Extracurricular Activities

FSU seeks to admit students who have special talents and abilities. Please indicate your involvement in activities, including honors programs, athletics, club sports, community service, fine or performing arts and other interests:

| Activity | HS9 | Check Ye HS10 | ear of Partici HS11 | pation HS12 | College | Positions held or honors won | Check if you intend to participate at FSU |
|----------|-----|------------------|------------------------|----------------|---------|------------------------------|--|
| | | | | | | | |
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Additional Information

| Transfer students only: Are you eligible to return to your last college/institution of attendance? | □Yes | □No |
|--|------|-----|
| If no, why not? | | |
| How did you first become aware of FSU? | | |

To what other colleges are you applying?

Character and Conduct

Answer all questions. An affirmative response to any of these questions will not result in an automatic denial of admission or enrollment. All relevant circumstances will be considered. The University reserves the right to request further information from the applicant to verify the information disclosed. Providing false information to any of the questions set forth below will be grounds for rejecting an application, or, if you are admitted, may result in revoking acceptance and/or referral through the disciplinary process.

□No

□Yes

| Has disciplinary action leading to s | suspension or expulsion been initiat | ed or taken against you at any of your previo | ous institutions (including FSU if previously enrolled)? 🛛 Yes |
|--------------------------------------|--------------------------------------|---|--|
|--------------------------------------|--------------------------------------|---|--|

Have you ever received formal disciplinary action or a dishonorable discharge from any branch of the military?

If you answered yes to any of the questions above, please provide a detailed explanation which you can attach to this application or email to FSUAdmissions@frostburg.edu. Be sure to include your name and birthdate. The application and explanation must be submitted at least 30 days prior to the first day of classes for the term for which you are applying.

| Military Educational Benefits | |
|---|----------|
| Have you ever served in any branch of the United States Military? | Yes No |
| Are you currently serving in a branch of the United States Military? | □Yes □No |
| Are you a dependent of a United States Military Veteran? | □Yes □No |
| Are you a dependent of an individual currently serving in a branch of the United States Military? | □Yes □No |

Signature

I certify that the statements made in this application are correct and complete. I understand that discovery of false information is grounds for immediate dismissal and forfeiture of all financial payments and academic credits.

If admitted, I agree to comply with all policies and regulations of Frostburg State University in effect while I am a student, and to assume responsibility for any financial obligations that I may incur. I understand that all information furnished to the Office of Admissions in connection with this application will be treated confidentially and will be disclosed to University officials having a legitimate educational interest. Should I be admitted to and enrolled at Frostburg State University, reports and recommendations on my behalf will not become a part of my permanent student record.

In making this application, I accept and agree to abide by the policies and regulations of Frostburg State University concerning drug and alcohol abuse and understand that the unlawful use of drugs or alcohol will subject me to the penalties contained in those policies and regulations.

If the answers to any questions on this application change, or if the conditions affecting my residency status change, I will notify the University, in writing, within fifteen (15) days of such change.

| Student's Signature | | Date |
|---------------------|--|------|
| Parent's Signature | | Date |
| - | (Required only if student is under 18 years old) | |

| Re | sidency Application Last Name | First Name | (legal name) | Birth Date | |
|------|--|-----------------|------------------------------|---|---------|
| Dog | rou wish to be considered for in-state tuition status? 🛛 No 🖄 Yes (If yes, you must complete this section of th | e application) | | | |
| IF / | ANY OF THE CATEGORIES BELOW APPLY, PLEASE CHECK THE APPROPRIATE BOX, PRO | WIDE REO | UESTED INFORMATI | ON AND/OR DOCUMENT. | |
| | I am a part-time (50%) or full-time regular employee of the University System of Maryland or, I ar regular employee of the University System of Maryland. | | | | o is, a |
| | Please indicate relationship: | | | | |
| | Please attach a letter of verification from the Human Resources Office of the campus at which you or your spou | se or parent o | or legal guardian is employ | ed. | |
| | I am a full-time active member of the U.S. Armed Forces whose home of residency is Maryland or or child of such a person. Please attach a copy of your deed or lease (if applicable), or verification from the ser recent assignment orders. Also, please indicate date of expected separation from the military | vice that you | have declared Maryland as | | |
| | I am a veteran of the United States Armed Forces residing in Maryland. Please submit a copy of your l Certificate of Eligibility. | | | other than honorable, please also submit a copy of | your |
| | I am the spouse or child of a veteran or active duty member of the United States Armed Forces usi 3311(b)(9) and living in Maryland. Please submit a copy of the veteran's DD214 and a copy of your Certifica | | | ost-9/11 GI Bill (38 U.S.C. §3319) or under 38 | U.S.C.§ |
| | I am eligible for in-state status consideration under the Maryland National Guard Nonresident Tu military occupational skill or (2) am a member of the Air Force critical specialty code. I understand that I must | | | | tical |
| API | PLICANTS SEEKING IN-STATE STATUS AS A MARYLAND RESIDENT MUST COMPLETE THE FOLLOWING C resident classification and out-of-state charges being applied. Residency classification informati The applicant may be contacted for clarification of an item, or for additional information as neces | on is evalua | • | | |
| PLE | ASE CHECK ONE: I am financially independent. I provide 50% or more of my own living and educational expenses and I hav | e not been cl | aimed as a dependent on a | nother person's most recent income tax returns. | |
| | I am financially dependent on another person who has claimed me as a dependent on his/her most recent documentation and go to item 10. | income tax r | eturns, or I am a ward of th | e State of Maryland. If a ward of the State, please s | ubmit |
| | Name of person upon whom dependent and relationship to applicant: | | | | |
| | a. How long have you been dependent upon this person? | | | | |
| | b. Is the person a resident of Maryland? | | | | |
| | Address of this person: | | city | state | |
| | c. Has this person claimed you as a dependent on their most recent tax returns? □ Yes □ No d. Has this person filed a Maryland state income tax return for the most recent year on all earned taxable in | دم دم | , | | |
| | d. Has this person filed a Maryland state income tax return for the most recent year on all earned taxable in If a Maryland tax return has not been filed within the last 12 months, state reason(s): | | | | |
| | e. Signature of this person: | | | | |
| The | Student Applicant is responsible for completing items 1 - 10. | | | | |
| 1. | | | | | |
| | Length of time at permanent address years months | | city | state | |
| | If less than 12 months, provide previous address: | | -14. | | |
| | Length of time at previous address yearsmonths | | city | state | |
| 2. | Did you move to Maryland primarily to attend an educational institution? | 🗆 Yes | □ No | | |
| 3. | Are all, or substantially all of your possessions in Maryland? | □ Yes | 🗆 No | | |
| 4. | Do you possess a valid driver's license? a. If yes, in what state? | □ Yes | □ No | | |
| | b. If Maryland, initial date of issue and if applicable, renewal date | | | | |
| | c. Have you possessed a driver's license in a state other than Maryland within the last 12 months? | □ Yes | □ No | | |
| 5. | Do you own/lease any motor vehicles? a. If yes, in what state(s)? b. If Maryland, initial date(s) of registration and if applicable, renewal date(s) _ | □ Yes | □ No | | |
| | c. Did you register your vehicle(s) in a state other than Maryland within the last 12 months? | 🗆 Yes | 🗆 No | | |
| 6. | Are you registered to vote? If yes, in what state? | □ Yes | □ No | | |
| 7. | Have you filed a Maryland state income tax return for the most recent year? a. If a Maryland tax return has not been filed within the last 12 months, state reason(s): | □ Yes | □ No | | |
| 8. | Is Maryland state income tax currently being withheld from your pay? If no, provide explanation. | □ Yes | □ No | | |
| 9. | Do you receive any public assistance from a state or local agency other than one in Maryland? a. If yes, indicate type and issuing state: | □ Yes | □ No | | |

10. I certify that the information provided is complete and correct. I understand that the University reserves the right to request additional information if necessary. In the event the University discovers that false or misleading information has been provided, the Student Applicant may be billed by the University retroactively to recover the difference between in-state and out-of-state tuition for the current and subsequent semesters.

Optional Essay

(Freshman applicants only)

Please complete a one-page, typed, personal statement to help the Admissions Committee become better acquainted with you and your communication skills. Include your name and birthdate at the top of the statement. You may also E-mail your essay to FSUAdmissions@frostburg.edu. This personal statement should focus on **ONE** of the following topics:

- 1. While many students entering college for the first time are undecided about their intended area of study, you may believe that you do know what area you wish to study. Write an essay discussing the decision process that has helped you focus on your intended area of study.
- 2. Certain areas of study tend to be talent-based for example, music, theatre and art. If you intend to pursue such an area of study, write an essay in which you discuss when and how you discovered your talent(s) and how you intend to pursue developing your talent(s) during your college studies.
- 3. Evaluate a significant experience, achievement or risk that you have taken and its impact on you.
- 4. Discuss some issue of personal, local, national or international concern and its importance to you.
- 5. Indicate a person who has had a significant influence on you, and describe that influence.
- 6. Describe a character in fiction, an historical figure or a creative work (as in art, music, science etc.) that has had an influence on you, and explain that influence.

FSU at a Glance

Majors

Accounting Adventure Sports Management Art & Design Athletic Training Biology **Business Administration** Chemistry **Communication Studies Computer Information Systems Computer Science** Early Childhood/Elementary Education Earth Science Economics **Elementary Education** Elementary/Middle School Dual Certification Engineering English **Environmental Analysis & Planning** Ethnobotany **Exercise & Sport Science** Foreign Languages & Literature Geography **Health & Physical Education** Health Science History Information Technology International Studies Interpretive Biology & Natural History Law and Society Liberal Studies Mass Communication Mathematics **Mechanical Engineering** Music Nursing (RN to BSN, transfer students only) Philosophy Physics

Political Science Psychology Recreation & Parks Management Secondary Teacher Education Secure Computing and Information Assurance Social Science Social Work Sociology Theatre Wildlife & Fisheries

Pre-Professional Programs

Dental Hygiene Dentistry Law Medical Technology Medicine Nursing Occupational Therapy Optometry Pharmacy Physical Therapy Veterinary Medicine

USM - Hagerstown:

Upper-level undergraduate majors:

- Business Administration
- Early Childhood Education
- Liberal Studies
- Psychology

Arundel Mills Higher Ed. Center:

Upper-level undergraduate major: • Engineering - Electrical Concentration

Cecil College:

Upper-level undergraduate major:

• Engineering – Materials Concentration

Online:

- Upper-level undergraduate major:
- Nursing (RN to BSN)

Associate to Bachelors in Nursing (ATB Option):

- Upper-level undergraduate major:
- Allegany College of Maryland
- Anne Arundel Community College
- CCBC Community College of Baltimore County
- Carroll Community College
- Cecil College
- College of Southern Maryland
- Frederick Community College
- Hagerstown Community College
- Harford Community College
- Prince George's Community College

FSU Phone Numbers

| Admissions | 301.687.4201 |
|---------------|--------------|
| Financial Aid | 301.687.4301 |
| Information | 301.687.4000 |

Frostburg State University is an Affirmative Action/Equal Opportunity Institution. Admission shall be determined without regard to race, color, religion, sex, national origin, age, status as a veteran or handicap.

FSU is committed to making all of its programs, services and activities accessible to persons with disabilities. To request accommodation through the ADA Compliance Office, call 301.687.4102 or use a Voice Relay Operator at 1.800.735.2258. FSU is a smoke-free campus.



OFFICE OF ADMISSIONS FROSTBURG STATE UNIVERSITY **101 BRADDOCK ROAD** FROSTBURG, MARYLAND 21532-2303 301.687.4201 FAX: 301.687.7074

FAX: 301.687.7074

Application Fee Transmittal Form

| Full Name | | middle | Birth Date |
|--|------------------------------------|--|------------|
| | ast first | middle | |
| A \$45.00 non-refu | ndable application fee is enclosed | in the form of a 🛛 Check 🔲 Money Order | |
| Date | | Student's Signature | |
| To pay the applica | | | |
| | ation fee with a credit card only | ne, visit www.frostburg.edu/payonline | |
| ·· • • • • • • • • • • • • • • • • • • | ation fee with a credit card onli | ne, visit www.frostburg.edu/payonline | |
| | ation fee with a credit card only | | |
| | OSTBURG T E UNIVERSITY | | |

Recommendation and Request for Academic Record

Note to Guidance Counselor/Principal: This portion of the application for admission is used exclusively by the Office of Admissions for the purpose of admissions only. It will not become part of the student's permanent record at Frostburg State University. Please type or print.

Transcript Request

| Please release the academic record, rank in class, test record and secondary school recommendation to the Frostburg State University Office of Admissions. This information may be presented on any form considered official to your particular |
|---|
| school, provided it carries the appropriate signatures and school seal. |
| |

| Date | | |
|--|--------------|---|
| Student Name | | |
| Name of High School | | |
| List senior year classes (or attach copy): | | |
| | | Unweighted Unweighted |
| | | Grading scale and weighting policies (or attach a school profile): A = to B = to C = to D = to F = to |
| Student's rank in class: (check one) | OR | Estimate of student's success in college: |
| □ Top 10% □ Top 25% | Actual rank: | Little success May encounter difficulty |
| □ Top 50% □ Lower 50% | Class size: | Average Above Average |
| We do not rank | | Superior Prefer not to estimate |

Recommendation and Request for Academic Record

(Continued from reverse)

Comments (Optional):

You may provide any information, either positive or negative, that you think would be of value in determining this student's admission to Frostburg State University. Please include how long and in what capacity you have known the applicant, and any outstanding personal or academic achievements.

| Signature | | Title |
|--|---|-------|
| Printed Name | | |
| Please send this form with the official transcript to: | OFFICE OF ADMISSIONS FROSTRURG STATE UNIVERSIT | v |

OFFICE OF ADMISSIONS FROSTBURG STATE UNIVERSITY 101 BRADDOCK ROAD FROSTBURG, MARYLAND 21532-2303