



University of
LOUISIANA
at Monroe

APPLICATION FOR
UNDERGRADUATE ADMISSION

OFFICE OF ADMISSIONS • 700 University Ave. • Monroe, LA 71209
Phone: 318-342-5430 • Toll-free: 800-372-5127 • Fax: 318-342-1915 • ulm.edu

OFFICE USE ONLY

☐ OOS ☐ LA RESIDENT

CWID# _____

ENROLLMENT TYPE

☐ FTF ☐ TRANSFER

☐ READMIT

☐ ADULT LEARNER

☐ INTERNATIONAL

PMT: ☐ Ck# _____

☐ M.O.# _____

☐ Receipt# _____

PLEASE NOTE: This application and fee are valid for only the term selected on this application or the following semester when a term change request form is submitted (www.ulm.edu/admissions/). A new application is required if you have graduated from ULM.

If applying for the **ULM Online Degree Program**, **DO NOT** complete this form. Apply online at ulm.edu/onlinedegrees.

Documents submitted to meet admission and residency requirements become property of ULM and may not be returned.

ENROLLMENT DATA

Term: I plan to enroll ☐ Fall 20____ ☐ Wintersession 20____ ☐ Spring 20____ ☐ Maymester 20____ ☐ Summer 20____

Type: I am a(n) ☐ First-Time Freshman ☐ Transfer Student ☐ Readmit ☐ Adult Learner ☐ International Student

Application fee; check one: ☐ \$20 ☐ \$30 INTERNATIONAL STUDENT ☐ FORMER DUAL ENROLLMENT/COLLEGIATE STUDENT (see below)

Non-refundable; payable by check/money order to ULM. If you are an incoming student who completed Dual Enrollment/Collegiate courses in the past two years and paid the \$20 fee, no fee is required with this application.

Students under current suspension and those who cannot furnish official transcripts because of indebtedness are not eligible to enroll at ULM.

PERSONAL DATA

Full Legal Name (Do not use nicknames or initials unless initials are your legal name.)

Last _____ First _____ Middle _____ Maiden _____

Social Security Number

____ - ____ - ____

Birthdate

____ - ____ - ____
Month Day Year

Gender

☐ Male
☐ Female

All other last names used on previous transcripts

RELIGIOUS PREFERENCE (Optional)

Mailing Address

No. & Street _____ City _____ Parish/County _____ State _____ Zip Code _____

How long have you lived at your present address?

Years _____ Months _____

Permanent Phone

() _____

Work Phone

() _____

E-Mail Address

Prior Home Address

No. & Street _____ City _____ State _____ Zip Code _____

How Long?

Years _____ Months _____

Will you be an income tax dependent of your parents and/or guardian during your enrollment at ULM?

☐ Yes ☐ No Should this status change, it is your responsibility to notify the Registrar's Office in writing.

IF YOU NEED ASSISTANCE BECAUSE OF A DISABILITY, PLEASE CONTACT THE ULM COUNSELING CENTER, 318-342-5220.

Are You a United States Citizen?

☐ Yes ☐ No

If no, country of citizenship

Country of birth

Visa type

TOEFL score

This information is voluntary and will be used in a non-discriminatory manner consistent with applicable civil rights laws.

Ethnicity:

☐ Hispanic/Latino ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

In case of emergency, list name of next-of-kin (Mother, Father, Guardian, Spouse, Brother, Sister)

Email Address _____

Name

Address

Phone () _____

Relationship to you

EDUCATIONAL DATA

Name, City, & State of last high school attended

Did you (or will you) graduate from high school? ☐ No

Dates Attended High School

Have you taken the ACT? ☐ No

☐ Yes (Year of Graduation: _____) ☐ GED

Fm: _____ Yr: _____

To: _____ Yr: _____

☐ Yes
Test Date: Mo. _____ Yr. _____

Have you ever enrolled at ULM? ☐ Yes ☐ No Dates attended: _____

List name and location (city and state) of ALL colleges attended including ULM, listing most recent first. Attach separate sheet, if necessary.	Dates Attended		Hours/ Credits	Degree, Cert. Received (if any)	Currently on Suspension	
	Fm (Mo/Yr)	To (Mo/Yr)			Y	N

REQUIRED DOCUMENTS

The student is responsible for ensuring these documents are submitted to the Office of Admissions.

An **OFFICIAL TRANSCRIPT** is received directly from one institution to another and is acceptable if it is in a sealed envelope from the institution. Documents submitted to meet admission and/or residency requirements become the property of ULM and may not be returned.

LA HIGH SCHOOL GRADUATE (first-time freshman):

☐ Official ACT/SAT Scores

OUT-OF-STATE HIGH SCHOOL GRADUATE and ADULT LEARNER (25 or older):

☐ OFFICIAL high school transcript (additional official high school transcript after graduation, if applicable)

☐ Official ACT/SAT Scores (test outs are available)

☐ OFFICIAL transcripts from each college/university attending (Dual Enrollment/Collegiate), excluding ULM.

GED GRADUATE:

☐ Official GED Scores

☐ Official ACT/SAT Scores

COLLEGE TRANSFER STUDENTS

☐ Official transcripts from EACH college/university attended; excluding ULM

If you have earned fewer than 18 semester hours;

☐ Official high school transcript

☐ Official ACT/SAT Scores

(ULM Code: ACT 1598; SAT 6482)

All students are required to submit proof of immunizations. www.ulm.edu/immunization/

UNDERGRADUATE DEGREE PROGRAMS

CHECK ONLY ONE MAJOR:

(See University Catalog for Specialty Areas)

COLLEGE OF BUSINESS AND SOCIAL SCIENCES

☐ Accounting (ACCT)
☐ Agribusiness (AGRB)
☐ Aviation (AVIA)
☐ Computer Information Systems (CIS)
☐ Computer Science (COSC)
☐ Construction Management (CMGT)
☐ Finance (FINA)
☐ General Business (GBUS)
☐ Management (MGMT)
☐ Marketing (MRKT)
☐ Risk Management and Insurance (RMIN)

COLLEGE OF ARTS, EDUCATION, AND SCIENCES

☐ Art (ART)
☐ Atmospheric Science (ATSC)
☐ Biology* (BIOL)
☐ Biology Ed. & Spec. Ed. Mild/Mod (Grd 6-12)

☐ Chemistry Ed. & Spec. Ed. Mild/Mod (Grd 6-12)
☐ Communication Studies (CMST)
☐ Criminal Justice (CRJU)
☐ Education-Elementary—Grades 1-5 (ELGR)
☐ Education-Secondary—Grades 6-12 (SEDT)
☐ Elementary Ed. & Spec. Ed. Mild/Mod (Grd 1-5)
☐ Elementary Ed. & Spec. Ed. Mild/Mod (Grd 6-12)
☐ English (ENGL)
☐ General Studies (GSBA)
☐ General Studies—Associate Degree (GSAD)
☐ Political Science (POLS)
☐ History (HIST)
☐ Kinesiology (KINS)
☐ Mass Communications (MCOM)
☐ Mathematics (MAPS)
☐ Math Ed. & Spec. Ed. Mild/Mod (Grd 6-12)
☐ Music (MSBM)
☐ Pre-Medical Laboratory Science
☐ Psychology (PSYC)
☐ Secondary Education & Teaching

☐ Social Studies Ed. & Spec. Ed. Mild/Mod (Grd 6-12)
☐ Social Work* (PSOW)
☐ Modern Languages (MDLG)

COLLEGE OF HEALTH AND PHARMACEUTICAL SCIENCES

☐ Dental Hygiene* (PDHG)
☐ Health Studies: Pre-Professional Option (HSPP)
☐ Health Studies: Management/Marketing Option (HSMM)
☐ Medical Laboratory Science* (PMLS)
☐ Nursing* (PNRS)
☐ Occupational Therapy Assisting* (POTA)
☐ Radiologic Technology* (PRTE)
☐ Speech-Language Pathology* (PSLP)
☐ Pharmacy* (PRPH)
☐ Pharmacy-Toxicology (PTOX)

I am undecided about my major.

☐ Undeclared

If you are applying for admission to a ULM Online Degree Program, DO NOT complete this form. Apply at ulm.edu/onlinedegrees

* Admission to a professional program is granted ONLY by the specific college. Only GENERAL ADMISSION to the pre-professional programs listed above is offered by the Admissions Office. Students who have completed pre-curriculum course requirements should contact the appropriate academic department for professional program applications.

** Pre-Dentistry, Pre-Medicine, and Pre-Optometry students should indicate Biology as a major.

PROOF OF IMMUNIZATION

All new students born on or after January 1, 1957, are required to submit proof of immunization for measles-rubella-mumps (Louisiana R.S. 17:170, Schools of higher learning), meningococcal meningitis Louisiana Acts 251 and 711, Prior to registration. Appropriate form available at ulm.edu/immunization. Return to THE UNIVERSITY OF LOUISIANA MONROE, STUDENT HEALTH CENTER, 700 UNIVERSITY AVENUE, MONROE, LA 71209. Phone: 318-342-1651.

RESIDENCY INFORMATION FOR TUITION PURPOSES

MARK THE APPROPRIATE BOX

☐ **Resident:** If you have lived in Louisiana for the past two years, you are directed to complete Part III only.

☐ **Non-Resident:** If you have lived in Louisiana for less than two years, you are directed to complete Part I or II.

State-supported colleges are required to collect documentary evidence of a student's Louisiana residency immediately prior to enrollment. The Admissions Office reserves the right to determine the validity of the documents submitted and to request additional information in order to comply with state residency requirements. Submitted documents become the property of ULM and may not be returned.

PART I: CLAIM FOR RESIDENCY BASED ON SELF, PARENT, SPOUSE, OR LEGAL GUARDIAN

Claim for Louisiana residency is based on:

☐ Self ☐ Parent ☐ Spouse ☐ Legal Guardian

Why did you move to Louisiana?

☐ Education ☐ Employment ☐ Job Transfer ☐ Other _____

Name of person on whom residency is based and length of Louisiana residency:

Last First Year(s) Month(s)

Have you been employed in Louisiana

in the past 12 months? ☐ Yes ☐ No

Employer

Telephone

Did you graduate from ULM?

☐ Yes ☐ No

Degree Received

Date Received

If either of your parents (mother or father only) is a graduate of THE UNIVERSITY OF LOUISIANA AT MONROE, please note below:

Parent's complete name while attending ULM

Parent's date of birth

Parent's Social Security Number

Parent's graduation date

PART II: CLAIM FOR RESIDENCY BASED ON ACTIVE MILITARY ASSIGNMENT IN LA of Self, Parent, Spouse, or Legal Guardian

NAME OF PERSON ON ACTIVE DUTY

Last First Middle

☐ Self ☐ Spouse
☐ Parent/Legal Guardian

HOME OF RECORD (DOCUMENTS MUST BE SUBMITTED)

PART III

Complete, sign, and return application with non-refundable application fee (payable by check or money order) to The University of Louisiana Monroe, Office of Recruitment/Admissions, 700 University Avenue, Monroe, LA 71209. This application and fee are valid for the following semester when a term change request form is submitted (www.ulm.edu/admissions/).

I certify that all information given is complete and accurate. I authorize ULM to verify the information I have provided. I realize that falsification or the intentional omission of any information on this form may lead to rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action. I agree to notify the proper officials of this institution of any changes in the information provided. I agree to abide by all the rules and regulations of the university. I understand if I fail to inform ULM of ineligibility and attend while under suspension from another institution, credits earned will be voided. Admission to the university does not constitute admission to a degree program. I do hereby authorize Louisiana public postsecondary education access to my academic records. I agree to allow ULM to share my academic records with other academic institutions for purposes of cross-enrollment and referral and to allow my photograph to be used in university publications.

APPLICANT'S SIGNATURE _____

DATE: _____

The University of Louisiana Monroe is a member of the UL System. ULM adheres to the principle of equal educational and employment opportunity without regard to race, color, creed or religion, national origin, sex, marital or parental status, age, disability, veteran status, or political belief. This policy extends to all programs and activities supported by the University.