Transfer Application for Admission and Academic Scholarships



PLEASE PRINT

1.	Full legal name							
	Last	First			or Former Last Na		Preferred Name	
2.	Social Security number	3. Birthdat	e		4. 7	Telephone 🗌 cell o	e Area Code	
	Required for financial aid co							_
5.	Email address	@			Would you I	like updates via te	ext message? 🗌 Yes	🗆 No
6.	Current address (effective through month/day/year	/) .						
			Number and	Street			City	
	County		State			2	(IP	
7.	Permanent address							
	Number and Street					City		
	County		State			Z	(IP	
8.	Gender* \Box Male \Box Female 9.	Religious preference	e (optional)					
10	. Please answer both of the following quest	ons:						
	10a. Predominate race/ethnic background	d*: Are you Hispanic	:/Latino? 🗌	Yes	🗌 No			
	10b. Please also check one or more of the f	bllowing which apply	to you: 🗆 A	merica	an Indian or A	laskan Native	Asian	
	\Box Black or African-American \Box I	Native Hawaiian or C	Other Pacific	Island	er 🗌 Whit	e/Caucasian		
11.	. Are you a U.S. Citizen? 🗌 Yes 🛛 No							
	11a. If no, are you a Lawful Permanent Res	ident? 🗌 Yes 🛛 🛛	No (Attach a	copy of	f your Permanent	Resident card)		
	11b. If you are NOT a U.S. Citizen o	r Lawful Permane	ent Reside	nt, ple	ase respond to	o the following:		
	What is your legal U.S. immigration visa st	atus?						

(Please specify and attach a copy of your passport information & visa page, I-94, and any approved or pending change of status requests.)

*Ethnicity and gender are important data in determining the effectiveness of efforts related to the provision of equal opportunity. For this reason they are requested. The provision of this information is optional.

Completion of items 12 13 is optional if you are 22 years of age or older.

12. Father's name					
	Last	First		Middle	
Father's Address: Number and Street		City		State	ZIP
Father's telephone	Other 🗌	cell or work Area Code	email		@
Area Code Father a high school graduate?		Northeast Alumnus? 🗌 Yes	s 🗌 No		
College(s) attended		/			
Degree(s) received					
Occupation					
13. Mother's name					
	Last	First		Middle	
Mother's Address: Number and Street		City		State	ZIP
Mother's telephone	Other	cell or	email		@
Mother a high school graduate?			s 🗌 No		
College(s) attended		,			
Degree(s) received					
Occupation					
14. When do you plan to enroll at Truman15. Your possible major area(s) of study?	? 20 🗆 Fall 🗌	Spring Summer If	summer, also enrollin	g for Fall? 🗌 Yes	□ No
 15a. Please mark any pre-professional interest(s): pre-law pre-medicine pre-Master of Arts in Education pre-dental pre-occupational therapy pre-medical technology pre-pharmacy pre-physical therapy pre-physician's assistant pre-veter 15b. If interested in a teaching career, please mark one of the following: pre-elementary education pre-secondary education pre-special edu 15c. If undeclared, please mark a general interest area if any: Business Fine Arts Gumanities Science 15d. If business administration, please mark one of the following: Finance International Business Management Marketing 					

16. Please list any siblings who currently attend or have attended Truman State University.

Name	Relationship	Previously Enrolled	Currently Enrolled
Name	Relationship	Previously Enrolled	Currently Enrolled
Name	Relationship	Previously Enrolled	Currently Enrolled
17. Are you a member of Phi Theta Kappa? 🛛 Yes	🗌 No		
18. If you are not a Missouri resident, are you, your particular state universe and you first learn about Truman State Universe 20a. Will you need on-campus housing?	-sity?		s? 🗌 Yes 🗌 No
Academic Information: If you have earned fewer than 24 hours of transferable collective the testing agency or as part of an official high school transferable collection of the testing agency or as part of an official high school transferable collective testing agency of the testing agency of testing age			ve submitted directly from
21. I have taken the ACT or SAT – indicate month and I plan to take or retake the ACT or SAT – indicate	, , ,		
22a. List the high school from which you graduated or	will graduate:	High School Name	
		Graduation Date	
City County	State ZIP	Graduation Date Moi	nth/Year
22b. If you did not graduate from high school and have	e taken the GED, please indicate the	e date Month	Year
Please send an official copy of your GED scores and o Office of Admission, Truman State Unive	, , , , ,	ool course work completed to	ical
23. Have you ever applied to Truman State University	(formerly Northeast Missouri State	University)? 🗌 Yes 🗌 No	
If yes, did you enroll? Yes No What 24. How many hours of college credit have you comp 25. If you are enrolled at a college/university now, how 26. Have you completed any Advanced Placement (AP 27. Have you completed any higher level International P	leted since graduating from high so w many hours of credit are you enr) courses & exams?	rolled in currently?] No	Term
 Official AP or IB College Grade Reports must be sent to 28. List all colleges and universities attended beging previously). Include institutions granting credit for college or university may void your admission. Official transcripts from each college or university must Street, Kirksville, MO 63501. 	nning with the current or most rece college course work completed duri	ent school (including Northeast/Truma ing high school, as well. Failure to indica	te enrollment at any

Name of College	Location (City/State)	Dates of Attendance		Hours	Degree(s)	
		From	То	Completed	Earned/Anticipated	

29. Are you eligible to return to the last college or university you attended? \Box Yes \Box No

Answers to 30a and 30b Required

30a. Have you ever been found responsible for a discip	olinary violation at any school you	have attended, whether related	to academic	misconduct or
behavioral misconduct, resulting in your probation	n, suspension, removal, dismissal c	or expulsion from the institution	🗌 Yes	🗌 No

30b. Have you ever been arrested or convicted of a misdemeanor, felony or other crime? \Box Yes \Box No

If you answered yes to either or both questions, attach a separate sheet giving the approximate date of each incident and explaining the circumstances.

31. If you have completed fewer than 24 hours of post high school college credit, complete this form. (1 unit = 1 year of HS class) Also, request that your high school transcript be sent to:
 Office of Admission, Truman State University, 100 E. Normal Avenue, Kirksville, MO 63501.

In the following section, please list courses in which you are currently enrolled and/or courses that you plan to complete prior to entering college.

Subject Area	Course Title	Full Year Course	Semester I Course	Semester 2 Course
English				
Mathematics				
Social Studies				
Science				
Fine Arts				
Foreign Language				
Additional Course Work				

PLEASE NOTE – Truman recommends students take a strong college preparatory high school curriculum including 4 years of English, 3 years of math (4 years strongly recommended), 3 years of social studies/history, 3 years of science, 2 years of the same foreign language, and 1 year of fine arts. Recommended courses for the fourth year of math include trigonometry/analytic geometry, pre-calculus, calculus, math analysis, etc.

Activity Information:

 32. Please attach an additional sheet(s) describing your involvement in school and/or community activities, including volunteer and paid work experience. Your submission will be considered in the admission review process as well as during consideration for Truman's competitive scholarship programs. We welcome information that highlights leadership development, demonstrates depth and/or breadth of involvement (including positions held and dates of office) and provides insight into special talents/abilities, honors and awards, or other relevant details. My activity list is enclosed. I will send/email my activity list separately. I do not wish to provide activity information.
Admission Essay:
 33. Your admission essay (1-3 pages in length) provides you with the opportunity to "personalize" your application. The writing sample you submit will be considered in both the admission and competitive scholarship selection processes. Be sure to include your full name on each page of your submission in response to one of the following prompts: <u>Option 1</u>: Please describe why you are interested in transferring to Truman State University. Feel free to include your area(s) of academic interest including the reasons for your selection(s). <u>Option 2</u>: "I soon realized that no journey carries one far unless, as it extends into the world around us, it goes an equal distance into the world within." –LILLIAN SMITH There is something profoundly intriguing about the telling of a journey – whether it be travel to exotic locales; in-depth personal discovery; a meandering walk through a dense, rich forest; or the realization of lifelong dreams. Tell us about a journey – real, imagined or metaphorical.
Your journey starts here.
 34. Please place an "X" by those activities in which you are interested in participating: Athletics-specify sport Cheerleading Debate/Forensics Drama Intramural sports Student government Student media Instrumental music-specify instrument Vocal music ROTC Sororities Fraternities Mock Trial Community Service Undergraduate research Dance Study Abroad Quiz/Academic Bowl
I hereby certify that to the best of my knowledge the information on this application is true and complete without evasion or misrepresentation. I understand that if found to be otherwise, it is sufficient cause for rejection or dismissal with forfeiture of all my fees and/or deposits. Further, I agree to accept and abide by all rules, regulations and policies established by the Board of Governors of Truman State University. I understand that transcripts from high school (if required) and all colleges attended must be on file with the University before I will be eligible for acceptance.

Last Name	First	Middle	Social Security Number
Applicant's Signature		Date	

For Consumer Information Disclosures, please visit consumerinformation.truman.edu.

NOTICE OF NONDISCRIMINATION - In compliance with federal law and applicable Missouri statutes, the University does not discriminate on the basis of sex, disability, age, race, color, national origin, religion, sexual orientation, or veteran status in admission to or employment in its education programs or activities.

The University complies with the regulations implementing Title VI and Title VII of the Civil Rights Act of 1964; Title IX of the Education Amendments Act of 1972; Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and other state and federal laws and regulations.

Inquiries: Inquiries concerning the University's compliance may be referred to Sally Herleth, Human Resources Director, 101 McClain Hall; 100 East Normal Avenue, Truman State University, Kirksville, MO 63501. Telephone (660) 785-4031.

Inquires may also be directed to Office for Civil Rights at: OCR.KansasCity@ed.gov.

Approved and Adopted by the Board of Governors December 1, 2012

Transfer Application Checklist

- Completed Transfer Application for Admission
- □ Official transcripts from all colleges attended
- \Box Admission essay in response to item #33
- □ Official high school transcript*
- □ ACT or SAT scores*

*Required of transfer applicants with fewer than 24 hours of transferable post high school college credit at the time of application.

Please send all documentation to **Office of Admission Truman State University** 100 E. Normal Avenue Kirksville, MO 63501-4221.