

# Application for Admission

for freshmen, transfer and non-traditional students.

# Start here to begin the experience of a lifetime.

## Step One

### Determine who you are.

The process and requirements for applying to Montana Western depend on whether you are a freshman, transfer or non-traditional student. Please use the definitions below to determine your student status. The boxes at right provide a detailed list of applicant requirements for each category.

**YOU ARE A FRESHMAN** if you have a high school diploma or GED; are under 21; and have never attended or have attempted fewer than 12 credits at a regionally accredited college or university. Please see the Freshman Checklist at right.

**YOU ARE A TRANSFER STUDENT** if you have attempted 12 or more semester credits at a regionally accredited college or university. We will review your transcripts and provide information about the transfer of credits. Please see the Transfer Checklist at middle right.

**YOU ARE A NON-TRADITIONAL STUDENT** if you have not attended college, are 21 years or older or you graduated from high school more than three years prior to the date you wish to enter college. Please see the Non-Traditional Checklist at bottom right.

## Don't forget these application deadlines.

**Deadline for Admission:** rolling

**Priority Admission Deadlines:** July 1 (fall semester); Dec. 1 (spring semester); April 1 (summer semester)

**Priority Deadline for Financial Aid Application\*:** March 1 (fall semester); Dec. 1 (spring semester)

\*To file the Free Application for Federal Student Aid (FAFSA) please visit [www.fafsa.ed.gov](http://www.fafsa.ed.gov).

**Scholarship Deadline:** Jan. 1

**WUE Deadlines:** July 1 (fall semester); Jan. 1 (spring semester)



Experience One is only at Montana Western.

## Step Two

### FRESHMAN STUDENT CHECKLIST

The following are required of freshmen seeking two- and four-year degrees:

- A completed application for admission (priority fall deadline is July 1).
- A \$30 non-refundable application fee.
- High school self-report form (see page five).
- ACT (writing subscores required) or SAT 1 scores.
- Students born after 1956 are required to send documentation of their Measles, Mumps and Rubella (MMR) vaccinations (two doses).
- Final-official high school transcript or official GED score.

For detailed information on degree requirements please visit [www.umwestern.edu](http://www.umwestern.edu).

### TRANSFER STUDENT CHECKLIST

The following are required of each transfer student applicant:

- Application for admission (priority fall deadline is July 1).
- \$30 non-refundable application fee.
- Final-official college transcripts.
- Students born after 1956 are required to send documentation of their Measles, Mumps and Rubella (MMR) vaccinations (two doses).

For detailed information on degree requirements please visit [www.umwestern.edu](http://www.umwestern.edu).

### NON-TRADITIONAL STUDENT CHECKLIST

The following are required of each non-traditional student applicant:

- Application for admission (priority fall deadline is July 1).
- \$30 non-refundable application fee.
- Final-official high school transcript or official GED score.
- Students born after 1956 are required to send documentation of their Measles, Mumps and Rubella (MMR) vaccinations (two doses).

For detailed information on degree requirements please visit [www.umwestern.edu](http://www.umwestern.edu).

# Application for Admission

## ABOUT YOU (PLEASE TYPE OR PRINT)

Full Legal Name \_\_\_\_\_  
FIRST MIDDLE LAST

Previous Name(s) \_\_\_\_\_ Preferred Name \_\_\_\_\_

Permanent/Parents' Address \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Mailing Address \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_  Check this box to receive TEXT messages

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Birthplace \_\_\_\_\_  
MONTH DAY YEAR

Country of Citizenship \_\_\_\_\_ If not the U.S. are you a permanent resident alien of the U.S.?  Yes  No

## VOLUNTARY INFORMATION

### PARENT(S)/GUARDIAN(S)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Did either of your parents or legal guardians complete a four-year bachelor's degree before your 18th birthday?  Yes  No

### GENDER & ETHNICITY

The University of Montana Western does not discriminate in admission, or the provision of services or employment policies on the basis of race, gender, national origin, marital status, creed, religion, age, or physical or mental disability. Providing the following information is voluntary and the information provided will not be used in a discriminatory manner.

Your gender?  Male  Female

Are you of Hispanic or Latino origin?  Yes  No

Please select the racial category below that best describes you.

- |  |   |
|--|---|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Non-resident Alien               |
| <input type="checkbox"/> Black or African American         | <input type="checkbox"/> Asian                            |
| <input type="checkbox"/> White                             | <input type="checkbox"/> Native Hawaiian/Pacific Islander |
| <input type="checkbox"/> Unknown Racial Heritage           | <input type="checkbox"/> Other (please specify) _____     |

### SOCIAL SECURITY NUMBER

We ask that you voluntarily provide the information below. Your social security number permits the school to distinguish between individuals of the same or similar names. You will not be penalized should you decline to provide this information. If you are receiving financial aid we will need your social security number to match your award.

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

MILITARY SERVICE

Have you served as a member of the United States armed forces?  Yes  No

Dates of active duty (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Dates of discharge (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_/ (documentation may be required)

City and state from which you entered the service \_\_\_\_\_

I am the spouse or dependent child of an individual who is a member of the U.S. armed forces.  Yes  No

My parent(s)/spouse is assigned to active duty in Montana.  Yes  No

Dates of active duty for parent(s)/spouse (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Dates of discharge for parent(s)/spouse (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_/ (documentation may be required)

**YOUR OBJECTIVES**

When will you enroll?  Fall 20\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_

BACHELOR'S DEGREE (indicate field of study below)  SECOND BACHELOR'S DEGREE (indicate field of study below)

If you plan to receive financial aid you must declare a degree below (please choose one only).

Bachelor of Arts Degrees

Anthropology & Sociology

Glass

Modern History

English

Interdisciplinary Social Science

Psychology

Visual Arts

Bachelor of Science Degrees

Biology

Environmental Sciences

Mathematics

Business

Health and Human Performance

Natural Horsemanship

Environmental Sustainability

Early Childhood Education Location \_\_\_\_\_

Early Childhood Education P-3

Elementary Education \_\_\_Dillon \_\_\_Butte

Secondary Education (please check one below)

Art K-12

Interdisciplinary Social Science

Biology

Mathematics

Business & Computer Applications

Modern History

Earth Science

Music K-12

English

Physical Education & Health K-12

General Science Broadfield

Bachelor of Applied Science

Education Endorsement \_\_\_\_\_

ASSOCIATE'S DEGREE (indicate program below)

Associate of Arts

Associate of Science

Associate of Applied Science: Business

Associate of Applied Science: Early Childhood Education SITE \_\_\_\_\_

Associate of Applied Science: Education Studies

Associate of Applied Science: Equine Studies

Associate of Applied Science: Natural Horsemanship

NON-DEGREE SEEKING (not pursuing a degree or certificate at this institution)

POST-BACCALAUREATE (bachelor's degree earned/not pursuing a graduate program at this time)

CERTIFICATE PROGRAMS

Early Childhood Education

Small Animal Grooming

Farrier Science

Glass

## YOUR ACADEMIC HISTORY

If you are or will be a high school graduate, please provide the following information:

Graduation Date      /      /      Complete Name of High School \_\_\_\_\_  
MONTH DAY YEAR

High School City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

If you have or will receive a GED, please indicate location and date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR

I am or will be a graduate of a Montana high school after attending that school for my entire senior year and I have or will be registering at a unit of the Montana University System within two fall terms of my high school graduation.  Yes  No

Were you previously enrolled at the University of Montana Western?  Yes  No

If yes, list dates of previous attendance \_\_\_\_\_ and/or dates of continuing education or extension enrollment \_\_\_\_\_

If you have attended or are attending a college or university, **you must** provide the following information for each institution (whether or not credit was earned). Please include an additional page if necessary. Use this area to report dual credit as well.

Complete School Name \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Attendance Period (term/year to term/year) \_\_\_\_\_ Degrees/credit earned \_\_\_\_\_

Complete School Name \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Attendance Period (term/year to term/year) \_\_\_\_\_ Degrees/credit earned \_\_\_\_\_

## YOUR RESIDENCY CLASSIFICATION

ARE YOU CLAIMING IN-STATE STATUS FOR TUITION PAYMENT PURPOSES?

- No What state are you a resident of? \_\_\_\_\_ (Skip to the Safety and Security section on the next page.)
- Yes Please answer ALL questions below and on the next page. If you are a dependent and are relying on the information of a parent, guardian or spouse to qualify for resident tuition, use the PARENT/GUARDIAN column. If you are using your own information to determine residency, please use the YOU column.

	UNDER 24: PARENT/GUARDIAN	24 AND OVER: YOU
Dates of continuous physical residence in Montana (month/day/year).	___/___/___ to ___/___/___	___/___/___ to ___/___/___
Dates of employment in Montana (month/day/year).	___/___/___ to ___/___/___	___/___/___ to ___/___/___
Employer _____ City _____ Employer _____ City _____	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other
List the last two years in which Montana income tax returns have been filed.		
Date current Montana driver's license was issued (month/year).	___/___	___/___
List the last two years of Montana motor vehicle registration.		
Date of Montana voter registration (month/year).	___/___	___/___
Dates of extended absences from Montana during the last two years (month/day/year).	___/___/___ to ___/___/___	___/___/___ to ___/___/___

Reason for absence(s) \_\_\_\_\_

ARE YOU CLAIMING IN-STATE STATUS FOR TUITION PAYMENT PURPOSES? (CONT.)

Please fill in the table below with information about **yourself** for the past two years.

DATES (MONTH/YEAR)		CITY/STATE OF RESIDENCE	EMPLOYER	SCHOOLS ATTENDED
FROM	TO			

**SAFETY & SECURITY (THIS SECTION MUST BE COMPLETED)**

1. Have you ever been convicted of a felony (including instances of deferred sentence)?  No  Yes
2. Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or to property?  No  Yes
3. Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons?  No  Yes
4. Have you ever been required to register as a sexual or violent offender?  No  Yes

If you answered "yes" to any of these questions, provide information for EVERY such conviction in a separate document. Failure to do so will delay the processing of your application.

**HOW DID YOU LEARN ABOUT UMW?**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> College fair              | <input type="checkbox"/> High school visit  | <input type="checkbox"/> UMW admissions representative |
| <input type="checkbox"/> Athletic recruiter        | <input type="checkbox"/> High school coach  | <input type="checkbox"/> High school teacher           |
| <input type="checkbox"/> High school counselor     | <input type="checkbox"/> Internet banner ad | <input type="checkbox"/> UMW website                   |
| <input type="checkbox"/> Newspaper/magazine ad     | <input type="checkbox"/> Radio              | <input type="checkbox"/> Television                    |
| <input type="checkbox"/> Family member             | <input type="checkbox"/> UMW alumni         | <input type="checkbox"/> Trio/Upward Bound             |
| <input type="checkbox"/> Current UMW student       | <input type="checkbox"/> Social media       |  |
| <input type="checkbox"/> Other (please list) _____ |   |  |

**YOUR SIGNATURE**

I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal. If my application for admission is approved, I agree to abide by the present and future rules and regulations, both academic and nonacademic, and the scholastic standards of the appropriate institution, its colleges, schools, departments and institutes, including but not limited to those rules, regulations and standards stated in the undergraduate catalog. I further acknowledge that if I fail to adhere to these regulations or meet these requirements, my registration may be canceled.

\_\_\_\_\_  
Applicant's Complete Legal Signature Date

PLEASE SEND THIS FORM AND APPLICATION FEE TO: The University of Montana Western, Office of Admissions, 710 S. Atlantic St., Dillon, Mont. 59725.

## HIGH SCHOOL SELF REPORT FORM

1. New freshman applicants who have graduated within the last three years MUST complete this form and return it with their application for admission (see GED-only exception below). A current transcript WILL NOT substitute for this document.
2. Official high school transcripts should be sent only after graduation.
3. Please complete the self-report form on the reverse side by listing all courses passed including those in progress. Please print clearly.

Name \_\_\_\_\_ Social Security No. (optional) — —  
FIRST MIDDLE LAST

Graduation Date     /     /  
MONTH DAY YEAR

Complete Name of High School \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone (     ) \_\_\_\_\_

OPTIONAL: Montana residents only, please include your Office of Public Instruction ID number (9 digits)

Current class rank \_\_\_\_\_ in a class of \_\_\_\_\_ Current cumulative grade point average on a 4.0 scale \_\_\_\_\_

**TEST SCORES (official scores from testing agency or official high school transcript required for admissions):**

ACT \_\_\_\_\_ Test date \_\_\_\_\_  
ENG MATH READ SCI COMPOSITE WRITING ELA ESSAY

SAT \_\_\_\_\_ Test date \_\_\_\_\_  
READING/WRITING MATH SECTION WRITING/LANGUAGE MATH TEST TOTAL

Montana University System (MUS) writing score \_\_\_\_\_ Test date \_\_\_\_\_

I have not yet taken the ACT or SAT Intended test date \_\_\_\_\_

Other (specify) \_\_\_\_\_ Test date \_\_\_\_\_

GED passed on this date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR CITY STATE

I understand that this information may be used as a preliminary basis for admission to the university. It is complete and correct as of this date. If information changes, I will notify the Admissions Office of the changes and understand that my admission status will be re-evaluated.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### PLEASE COMPLETE THE FORM ON THE BACK USING THE EXAMPLE BELOW AS A GUIDE.

Montana University System College Preparatory Requirement	Semester	9th Grade course/grade	10th Grade course/grade	11th Grade course/grade	12th Grade course/grade	OFFICE USE
<b>A. English</b> (4 years) Written and oral communication skills and literature.	1	English B+	English B+	American B+	Reading B+	
	2	English B+	English B+	American B+	Sci Fiction B+	
<b>B. Mathematics</b> (3 years) Including Algebra I, Geometry, Algebra II (or sequential equivalent).	1	Algebra I B	Geometry B	Algebra II B		
	2	Algebra I B	Geometry B	Algebra II B		

## SELF REPORT OF HIGH SCHOOL COURSES

### INSTRUCTIONS AND FORM

**COLLEGE PREPARATORY COURSES:**

Complete this section using the exact titles and grades of high school courses you have passed. Also include courses you plan to take (place an asterisk(\*) in the field rather than a grade). If you are unsure of any information, contact your high school counselor or principal for clarification.

**GRADUATES OF MONTANA HIGH SCHOOLS:**

Your high school counselor or principal has the "School List of Academic Courses that Satisfy the Board of Regents' College Preparatory Curriculum." Use only your courses from the list to complete this section.

**GRADUATES OF HIGH SCHOOLS OUTSIDE THE STATE OF MONTANA:**

If you have completed a similar college preparatory program required in your state, please have your school verify the completion below.

Montana University System College Preparatory Requirement	Semester	9th Grade course/grade	10th Grade course/grade	11th Grade course/grade	12th Grade course/grade	OFFICE USE
<b>A. English</b> (4 years) Written and oral communication skills and literature.	1					
	2					
<b>B. Mathematics</b> (3 years) Including Algebra I, Geometry, Algebra II (or sequential equivalent).	1					
	2					
<b>C. Social Studies</b> (3 years) Including global (world) studies; American hist.; and gov't, econ, Indian history, psych, sociology or other third-year course.	1					
	2					
<b>D. Laboratory Science</b> (2 years) Including at least one year of earth science, biology, chemistry or physics.	1					
	2					
<b>E. Other</b> (2 years) Chosen from foreign language, computer science, visual/performing arts or vocational education.	1					
	2					

### COLLEGE PREPARATORY VERIFICATION (OUT-OF-STATE STUDENTS ONLY)

\_\_\_\_\_ has completed or will complete the college preparatory curriculum.  
STUDENT NAME

approved by the State of \_\_\_\_\_

Printed name of high school official \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Date \_\_\_\_\_