



GETTING STARTED

Please complete all fields of this new student application clearly in blue or black ink. Missing information will delay the processing of your application. Return this application with the \$40 non-refundable application fee. Students who are not pursuing a baccalaureate degree or certificate should submit a Non-degree seeking application.

To apply online visit www.uscb.edu/apply.

Entering Term/Year, select only one:

FALL 20____ SPRING 20____ SUMMER 20____

Student Status upon entry, select only one:

Freshman Concurrent/Dual Enrollment (Simultaneously enrolled in High School and USCB) Transfer Second Bachelor's Degree

CONTACT INFORMATION

LAST NAME FIRST MIDDLE SUFFIX (Jr. etc.)

MALE

MAIDEN/Any other name on record

DATE OF BIRTH (MONTH/DAY/YEAR)

AGE

FEMALE

SOCIAL SECURITY NUMBER

E-MAIL ADDRESS

PERMANENT MAILING ADDRESS (All mail will be sent to this address)

CITY

STATE

ZIP

COUNTY

LOCAL MAILING ADDRESS (If different)

CITY

STATE

ZIP

COUNTY

PERMANENT PHONE NUMBER

CELL PHONE NUMBER

ETHNIC BACKGROUND

The University of South Carolina Beaufort is required to collect information on the ethnic and racial composition of its student body and report this information to the U.S. Department of Education.

Do you consider yourself to be either Hispanic, Latino or of Spanish origin? Yes No

Please select one or more of the following groups with which you identify:

White, not of Hispanic origin

Asian or Pacific Islander

American Indian or Alaskan native

Hispanic

Black, not of Hispanic origin

Other

PARENT/GUARDIAN INFORMATION

Name of your parent, spouse, or closest relative:

LAST NAME

FIRST NAME

RELATIONSHIP

ADDRESS OF PERSON LISTED ABOVE

CITY

STATE

ZIP

PHONE

EMAIL ADDRESS

HIGH SCHOOL INFORMATION

Name of your high school _____

CITY _____ STATE _____

Graduate? Yes No Still Enrolled Date of (or anticipated date of) graduation? _____

If you are currently attending high school, list all courses you plan to take during your entire senior year.

COURSE	CREDIT	COURSE	CREDIT

TESTING

ACT SAT (either the SAT or ACT is required) Date taken _____ Did you have the testing center send you scores to USCB? Yes No

GED GED State _____ GED Year _____

COLLEGE INFORMATION

Have you taken any USC/USCB courses before? Yes No If yes, when? _____

Have you taken any college classes for credit or do you expect to attempt college classes for credit before entering USCB? Yes No

If yes, list the names and dates of attendance of all colleges, beginning with the earliest dates, whether or not you expect to transfer credit.

Are you eligible to return to your former institution? Yes No

Have you earned a baccalaureate degree? Yes No

NAMES OF ALL COLLEGES	CITIES	FROM	TO

ADDITIONAL INFORMATION

(This information is optional and does not affect admission decisions)

How did you learn about USCB? _____

What factors influenced you to apply to USCB? (Check all that apply)? _____

- Affordable Tuition Commuting convenience Availability of major USCB publications/website Athletic program
- Small class size Close to home Visit to campus On-campus housing
- Referred by: USCB student USCB alumni High school counselor Parents/family

Other _____

What other colleges or universities (if any) are you considering? _____

Do you plan to complete a bachelor's degree at USCB? Yes No

If you do not plan to complete your bachelor's degree at USCB, please explain your college plans: _____

Did your parents complete a bachelor's degree? Mother only Father only Both Neither

DEGREE PROGRAMS

Please check the degree program you plan to pursue

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Biology | <input type="checkbox"/> History | Are you also interested in a Pre-professional track? | <input type="checkbox"/> Certificate program in:
<i>Please indicate your preference</i> |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Hospitality Management | | <input type="checkbox"/> Professional/Business Spanish |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Human Services | <input type="checkbox"/> Pre-Dental | <input type="checkbox"/> Hispanic Studies/Culture |
| <input type="checkbox"/> Management | <input type="checkbox"/> Liberal Studies | <input type="checkbox"/> Pre-Law | <input type="checkbox"/> Other return-to-college programs for working professionals
<i>Please indicate your preference</i> |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Pre-Medical | |
| <input type="checkbox"/> Saturday Degree Completion | <input type="checkbox"/> Secondary Education Track | <input type="checkbox"/> Pre-Pharmacy | _____ |
| <input type="checkbox"/> Communications Studies | <input type="checkbox"/> Nursing | <input type="checkbox"/> Pre-Veterinary | _____ |
| <input type="checkbox"/> Computational Science | <input type="checkbox"/> RN to BSN | <input type="checkbox"/> Pre-Engineering | |
| <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> 4-year BSN program | <input type="checkbox"/> Undecided | |
| <input type="checkbox"/> Elementary Education | <input type="checkbox"/> Psychology | | |
| <input type="checkbox"/> English | <input type="checkbox"/> Spanish | | |
| <input type="checkbox"/> English Writing | <input type="checkbox"/> Spanish for Heritage Speakers | | |
| <input type="checkbox"/> Health Promotion | <input type="checkbox"/> Sociology | | |
| | <input type="checkbox"/> Studio Art | | |

Military and Military Dependents **Only**

- Associate of Arts Associate of Science
-

RESIDENCY *Please answer all applicable questions, unanswered questions may result in non-resident fees and tuition.*

Note: No person is eligible for in-state status unless he/she is domiciled within South Carolina. A person does not acquire a domicile in South Carolina until he/she has been a legal resident of the state for 12 consecutive months immediately preceding registration for the term for which in-state status is claimed or meets state requirements for domicile. Contact the Office of Admissions at (843) 208-8055 for information on the South Carolina residency requirements.

Are you a citizen of the United States? Yes No

If No, are you a legal immigrant (permanent resident alien) of the United States Yes No

Resident Alien Number _____ Country of Citizenship _____
(Please submit a copy of your resident alien card)

Do you claim legal residency in South Carolina for purposes of in-state tuition? Yes No

If Yes, how long have you lived in South Carolina? _____ years _____ months

Are you a legal resident of Bryan, Chatham or Effingham County, GA? Yes No If Yes, how long have you lived in Georgia? ____ years ____ months

For Federal tax purposes, are you a Dependent who is claimed by a Family Member listed on this application as an exemption?

(Hint: answer No if you are a single adult, or if you are married and file jointly or as head of your household.) Yes No

Are you or will you be on active duty in the US Armed Forces during the term for which you are applying? Yes No

If Yes, which branch? _____ Dates of active duty from _____ until _____

Are you an honorably discharged veteran of the US Armed Forces? Yes No If Yes, which branch? _____

Are you the dependent of an active duty military person? Yes No

(Active military and dependents please submit a copy of military orders for tuition purposes)

If Yes, is South Carolina the state of legal residence for the active duty military person on whom you are dependent? Yes No

If you are under age 25 years of age, please provide the following information:

Parent/guardian/spouse Last Name: _____ Parent/guardian/spouse First Name: _____

Relationship to you: _____

Is the family member named above a legal resident of South Carolina? Yes No

If the above named person is a SC resident, how many years and months has he/she lived in SC? (e.g. 38 years and 3 months) _____ years _____ months

Is this person a US Citizen? Yes No

Does this person claim you as a dependent/exemption on Federal income taxes?

(Hint: if your parents are married and file jointly and claim you as a dependent, answer Yes.) Yes No

BACKGROUND INFORMATION

The University of South Carolina Beaufort is committed to maintaining a safe environment for all members of our community. Your application will not be processed without these responses. An affirmative answer to any of these questions does not automatically prevent admission to the institution but does require review.

Do you currently have disciplinary or academic misconduct charges pending against you from a high school, college, or university, or have you ever been disciplined, suspended, or expelled for conduct code violations from a high school or postsecondary educational institution? No ____ Yes ____ If yes, please explain:

Have you ever been convicted of a crime other than a minor traffic violation including Nolo Contendere, or are there any criminal charges now pending against you? No ____ Yes ____ If yes, please explain:

Is the offense a misdemeanor or a felony? Please list all offenses:

CERTIFICATION AND SIGNATURE

I certify that all information provided is complete and correct. I understand that any falsely reported information, including current or previous behavioral or criminal infractions incurred since 9th grade, is cause for immediate denial or revocation of admission and cancellation of registration or enrollment at the University of South Carolina Beaufort. I understand that the University may find it necessary to request additional information from my current or previous colleges, schools, or testing services; or to conduct a criminal background check on me. I grant permission to my current or previous colleges, schools, and testing services to release information to the University of South Carolina Beaufort, and I grant permission to the University to conduct a criminal background check at its sole discretion.

SIGNATURE

DATE

University of South Carolina System provides affirmative action and equal opportunity in education and employment for all qualified persons regardless of race, color, sex, national origin, age, disability or veteran status.

NEXT STEP

Please mail this application with your \$40.00 application fee to:

USCB Office of Admissions, One University Boulevard, Bluffton, SC 29909.

Make checks payable to University of South Carolina Beaufort.

Please request to have your official high school transcript, college transcript(s) and SAT/ACT test scores sent to the Admissions Office.
One University Blvd., Bluffton, SC 29909 • www.uscb.edu • **843.208.8000** • Admissions: **843.208.8055** • Fax: **843.208.8290**

USCB has Rolling Admissions. Apply early and USCB will send you an admission decision in approximately two to four weeks.

Fall Semester Application Deadline ~ July 1

Spring Semester ~ December 1

Summer Semester ~ May 1

All application materials must be received by the close of business on the posted deadline date - not the postmark date.