

HS DUAL CREDIT/EARLY ENTRY

Student ID _____
(for institutional use only)



Undergraduate Application for Admission

NDUS Procedure 402.0.0

June 2, 2010

Please Read All Directions Carefully

Please print in ink

Please mail the completed Application for Admission and the \$35 non-refundable application fee to:

Bismarck State College Alternative Learning Coordinator
PO Box 5587
Bismarck ND 58506

1. Have you previously applied for admission to Bismarck State College? Yes No
2. Have you previously attended Bismarck State College? Yes No If yes, list last date attended: ___/___/_____
3. Will you be registering for courses from more than one North Dakota University System institution? Yes No
4. Legal Name: _____
Last (Surname or family name) First (Name or Given Name) Middle Former (Surname or Family Name) (if applicable)

5. Social Security Number*(U.S. residents only) _____ - _____ - _____

* **Disclosure of this information is voluntary. Failure to provide a Social Security Number may cause delays in administrative services such as financial aid processing and receiving federal tax information. International Students: Please provide a U.S. Social Security Number if you have been assigned one. If you are entering the U.S. for the first time, please leave this blank.**

6. Gender:** Male Female

7. Your Birthdate: ___/___/____ Place of Birth: _____
Month Day Year Country City State/Province/Municipality

8. Are you a U.S. Citizen? Yes No If no, in which country do you hold citizenship? _____

9. If not a U.S. Citizen, are you a permanent resident of the U.S.? Yes No If yes, give alien registration number _____

10. Are you Hispanic/Latino?** Yes No

11. Select one or more races:** American Indian or Alaska Native – list applicable ethnic group(s) _____
 Asian – list applicable ethnic group(s) _____
 Black or African American – list applicable ethnic group(s) _____
 Native Hawaiian or Other Pacific Islander – list applicable ethnic group(s) _____
 White – list applicable ethnic group(s) _____

12. Your Mailing Address: _____
Country, (if not USA) Street Apt # City State/Province/Municipality

Zip Code County Telephone Your E-mail Address: _____

Permanent Address: _____
Country (if not USA) Street Apt # City State/Province/Municipality

Zip Code County Telephone

13. Mother/female guardian name: _____ Father/male guardian name: _____
Parent/Guardian Address: _____
Country (if not USA) Street Apt # City State/Province/Municipality

Zip Code County Telephone E-mail Address: _____

14. Check the option that best describes your current educational goal at this institution (keeping in mind that not all options are available at each institution):
 Earn a certificate/diploma (circle one) Earn a bachelor degree Complete courses but not a degree
 Earn an associate degree Complete undergraduate courses and transfer

15. Indicate delivery method/location through which you will be taking courses (check all that apply):
 On campus Online Off-campus site (indicate location): _____

16. Indicate term you plan to enter: Fall Spring Summer _____ Year

17. Indicate academic major/program: _____

** **Disclosure of this information is voluntary. This information is requested for statistical purposes only and will not affect the status of your application. This information will not be used in a discriminatory manner.**

18. List the last high school attended: _____
High School *City* *State* *Graduation Date*

_____ *GED (high school equivalency exam) Completion Date*

19. Indicate the completion date (if applicable) of the following exams: ACT _____ SAT _____
Month/Year *Month/Year*

20. List all colleges, universities, and schools attended, or currently enrolled, whether or not credits were earned. Include college credits earned while in high school.

Failure to list all colleges, universities, and schools previously attended may result in denial of admission, rescission of admission, dismissal, loss of credit(s), or other appropriate sanctions.

NAME	LOCATION (City, State)	INCLUSIVE DATES OF ATTENDANCE	DEGREE(S) EARNED AND DATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

21. Do you now or have you live(d) in North Dakota? Yes No If yes, list years (e.g. 1990-present or 1990-2009) _____
 If no, or not currently a ND resident, in what state are you a resident? _____ List years (e.g. 1997-present) _____
 If you have lived in ND less than one year, in what state did you most recently reside? _____ List years _____

22. Are you the spouse or a dependent of a graduate of a North Dakota public institution of higher education? Yes No
 If yes, which institution(s)? _____

23. Are you a Veteran of the United States (U.S.) Armed Services? Yes No

24. Are you a member of any of the following U.S. Armed Services? Army Navy Air Force Marines Coast Guard
 North Dakota National Guard National Guard
 If so, are you: Active Duty Reservist Dependent/Spouse

Additional Information Required

All students making application must answer the following questions. An affirmative response to any of these questions will not automatically prevent admission, but you will be asked to provide additional information. The information will be reviewed by a campus officer or committee charged with that responsibility. Falsification or omission of information may result in a denial of admission, rescission of admission, dismissal, or other appropriate sanction.

- 1) Have you ever pled guilty (or no contest) to or been convicted of any felony? Yes No
- 2) Within the past 10 years, have you pled guilty (or no contest) to or otherwise been convicted of a misdemeanor crime involving violence or the threat of violence in any court? ("Crime of violence" means an offense that involves substantial risk that physical force may be used against a person or property of another. Examples of crimes of violence include, but are not limited to, abuse, arson, assault (including sexual assault or domestic violence), battery, breaking and entering, burglary, criminal mischief or vandalism, harassment, homicide, menacing, reckless endangerment, stalking, terrorizing and unlawful restraint or imprisonment. Yes No
- 3) Are you currently required to register as a sex offender in any state? Yes No
- 4) Have you been dismissed or suspended from a college or university for disciplinary reasons within the last 5 years? ("Dismissed for disciplinary reasons" means a permanent separation from an institution due to conduct or behavior. "Suspended for disciplinary reasons" means a sanction imposed for disciplinary reasons that results in a student leaving school for a fixed period but not permanently.) Yes No

Go to <http://www.ndus.nodak.edu/policies/ndus-policies/subpolicy.asp?ref=2602> to view the list of NDUS academic programs which require further criminal history background checks. These may include nationwide FBI criminal history background checks or a criminal history background check which may be a North Dakota BCI check, nationwide check or check of another state or multiple jurisdictions.

Signature Required

I understand the information presented on both sides of this form will be used in evaluating my application for admission to Bismarck State College. I certify that all statements are complete and true as of this date. If this information changes, I will notify the Admission/Enrollment Services Office of the changes and understand that my admission status will be reevaluated at that time.

Signature of Student: _____ **Date:** _____

Supplemental Questions

Has either of your parents graduated from college? Yes No

DUAL CREDIT REGISTRATION FORM

Dual Credit Student - You are a high school student applying to enroll in (a) college course(s) BEFORE high school graduation and will use the course(s) for BOTH college and high school credit.

Course Title	Class #	Course #	Credit Hours	Class Start Time	Class Stop Time
<i>College Composition I -----SAMPLE-----</i>	16776	110	3	8:30am	9:20am

EARLY ENTRY REGISTRATION FORM

Early Entry Student - You are a high school student applying to enroll in (a) college course(s) BEFORE high school graduation and will use the course(s) ONLY for college credit.

Course Title	Class #	Course #	Credit Hours	Class Start Time	Class Stop Time
<i>College Composition I -----SAMPLE-----</i>	16776	110	3	8:30am	9:20am

Semester Begins:

Semester Ends:

Instructor:

Required Signature

I understand the information presented on both sides of this form will be used in evaluating my application for admission to a North Dakota University System institution. I certify that all statements are complete and true as of this date. If this information changes, I will notify the Admission/Enrollment Services Office of the changes and understand that my admission status will be reevaluated at that time.

I authorize Bismarck State College to release my list of classes including grades to my high school after completion of course(s). By signing this document it is understood the student, parent, and or guardian is responsible for all costs related to the above registered courses and understands tuition/fee payment due dates and withdrawal procedures.

Signature of Student _____ Date _____

Signature of Parent or Legal Guardian _____ Date _____

Signature of School Administrator _____ Date _____