



ADULT/TRANSFER APPLICATION

Fee _____
Office Use Only

Please complete and return with the non-refundable fee of **\$40.00** (U.S. funds) to the Application Processing Center, University of Maine System, PO BOX 412, Bangor, ME 04404-0412.
Second degree and readmit applicants are exempt from paying the application fee.

I am applying for: Fall _____ Spring _____ Summer _____ (Accelerated Nursing students Only)
(year) (year) (year)

Full-time _____ Part-time _____ On-campus _____ Off-campus _____

Print Legal Name: _____
Last First Middle

Name used on previous records: _____

Social Security or Insurance number* _____ - _____ - _____ Male _____ Female _____
**This number is used to verify your identity for administrative, financial aid, and campus employment purposes. We need this number to process your financial aid. If not provided on your admissions application, you will be required to provide it at a later date.*

Mailing Address: _____
Street City State Zip

City/State of Legal Residence: _____

Home phone:(_____) _____ Cell phone:(_____) _____ Preferred phone:(_____) _____

E-Mail Address: _____

Date of Birth: ____/____/____ Country of Citizenship: _____
mm dd yy

Are you a **Maine resident**? _____ How long have you lived in Maine? _____

(Optional) Please select one or more of the following racial categories to describe yourself:
____ American Indian or Alaskan Native ____ Asian ____ Black or African American ____ Native Hawaiian or other Pacific Islander ____ White

Have you previously applied to UMFK as a degree candidate? _____ What year? _____

What is your **intended major**? _____ Bachelor's _____ Associate's _____

Please indicate the **high school** you graduated from, including any post-high school you have attended.

High School Name	Location (city, state)	Dates Attended	Graduation Date

Contact the high school (s) and have an official transcript forwarded to the *Application Processing Center*.

If you earned your high school equivalency diploma through the **GED Examination**, please indicate the year _____ and provide an official copy.

List all **colleges** attended.

<i>College Name</i>	<i>Location (city, state)</i>	<i>Dates Attended</i>	<i>Graduation Date</i>

Please contact the college (s) and have official transcript (s) forwarded to the *Application Processing Center*.

MANDATORY RESPONSE REQUIRED:

Have you ever been found responsible for a disciplinary violation at an educational institution you have attended from 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct that resulted in your suspension, removal, dismissal or expulsion from the institution? Yes No

Have you ever been convicted of a misdemeanor, felony or other crime, or adjudicated of committing a juvenile crime?
 Yes No

If you answered yes to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident and explains the circumstances.

Are you a **veteran**? _____ Are you eligible for veterans benefits? _____

Do you intend to apply for **financial aid** consideration? _____

Please describe your **work experience** since leaving high school.

Please indicate how your attention was called to this campus.

Briefly describe the reasons that influenced your **decision to attend UMFK**. Use additional paper if needed.

My signature below verifies that the information on this application is accurate to the best of my knowledge. If I am a transfer applicant who has attended another campus in the University of Maine System, I give permission to UMFK's Office of Admissions to request my academic record electronically.

(Applicant's Signature)

(Date)

Please return this form with your non-refundable application fee of \$40.00 (U.S. funds) to:

Application Processing Center
University of Maine System
PO Box 412
Bangor, ME 04402-0412