

EASTERN KENTUCKY UNIVERSITY

Undergraduate Admission Application Form

Complete and mail this form along with your one-time, non-refundable \$35 Application Fee to:

Office of Admissions
112 Student Success Building, SSB CPO 54
Eastern Kentucky University
521 Lancaster Avenue
Richmond, KY 40475-3154

859-622-2106 or 800-465-9191
859-622-8024 (Fax)
admissions@eku.edu

Deadlines:

Fall: August 1
Spring: December 1

Do Not Write In This Area

Date _____ Date _____
AdmTyp _____ StuTyp _____
Decision _____
Reviewed by _____
Semester _____
EKU ID No _____

1. Name _____
Last First Middle

2. Soc. Sec. No. _____ - _____ - _____ (REQUIRED)

3. Other Names Under Which Records May Be Listed _____

4. Permanent Address

Street Address City State Zip Code

County Home Telephone Cell

5. Current Mailing Address, if different from above

Street Address City State Zip Code

County Home Telephone Cell

6. May we send a text message to your cell phone? Yes No

7. Gender Male Female

8. Date of Birth _____ Student's E-mail Address _____
Month Day Year

Parent's E-mail Address _____

9. Do you have one of the following connections to military service?

Active Duty Reserve/Guard Veteran Dependent with VA eligibility

10. Ethnic Group (This information about predominant ethnic background is required in order that EKU may demonstrate to the U.S. Department of Education its compliance with Title VI of the 1964 Civil Rights Act. This information is used for statistical purposes only.)

a) Do you consider yourself to be Hispanic/Latino? Yes No

b) Please select one or more of the following racial groups to describe yourself:

American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White

11. If you are an international student, please specify country of citizenship, type of visa and the date your visa expires.

12. During which semester do you plan to attend EKU?

Year _____ Fall (August) Spring (January) Summer

13. Where will you be taking classes?

Richmond Corbin Danville Manchester Other (please specify) _____

14. High (or) Home School _____

Street Address _____ City _____ State _____ Zip Code _____

County _____ Telephone _____

Graduated—Month ____ Year ____ Will Graduate—Month ____ Year ____ Passed GED—Month ____ Year ____

15. Did either of your parents receive a degree from EKU? Yes No What type of degree and when? _____

16. Please give specific dates (month/year) during which you have resided in Kentucky _____

17. Indicate your intended program of study at EKU (see list of majors at www.eku.edu/futurestudents/programs.php).
If you have not yet made a decision, please write "undeclared."

Major: _____ Concentration: _____

18. Degree Pursued: Two-Year Program (Associate Degree) Four-Year Program (Bachelor's Degree)
 Special Student (Visiting, High School Visitor, or Non-Degree)

19. Applying as (check one): First-Time Freshman
 Transfer (You have attempted college work elsewhere, after high school graduation.)
 Readmission (You previously attended EKU.)
 Please indicate semester last attended _____ Year _____
 Have you ever taken off-campus extension courses? Yes No
 Post Bachelor's (You have a four-year degree and are working on an additional undergraduate degree.)
 Visiting (You are pursuing a degree at another institution and will transfer ECU credits back to that institution.)
 High School Visitor (sophomore or junior in high school wishing to enroll at ECU)
 Non-Degree (You are not pursuing a degree.)

20. Please list all colleges/universities attended since leaving high school

Name of College/University City/State Degree (if any) Dates of Attendance—Month/Year

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

21. Financial Aid: Do you want to apply for financial assistance? Yes No

22. ROTC Scholarships: Are you interested in ROTC scholarships? Yes No

23. Housing (see housing policies at www.housing.eku.edu): Do you plan to live on campus commute

24. Did either of your parents attend college? Yes No

25. Scholarships: If you want to apply for an academic scholarship, see enclosed application or visit www.scholarships.eku.edu.

26. I understand that withholding information on this application or giving false information will make me ineligible for admission.
With this in mind, I certify that the above statements are correct and complete.

Signature (Must be signed; DO NOT PRINT)

Date