

# Application for Undergraduate Admission to Idaho's Public Colleges & Universities

For office use only	

Mail the completed application or a photocopy along with the appropriate nonrefundable application fee(s) to each Idaho public institution to which you are applying.

## Applying to:

**Boise State University**  
1910 University Dr  
Boise, ID 83725-1230  
fee: \$30 Phone: (800) 824-7017  
[www.boisestate.edu](http://www.boisestate.edu)

**College of Southern Idaho**  
PO Box 1238  
Twin Falls, ID 83303-1238  
fee: none Phone: (208) 733-9554  
[www.csi.edu](http://www.csi.edu)

**Eastern Idaho Technical College**  
Student Services, 1600 S 25th E  
Idaho Falls, ID 83404  
fee: \$10 Phone: (800) 662-0261  
[www.eitc.edu](http://www.eitc.edu)

**Idaho State University**  
Office of Admissions  
Box 8270  
Pocatello, ID 83209  
fee: \$30 Phone: (208) 236-2475  
[www.isu.edu](http://www.isu.edu)

**Lewis-Clark State College**  
500 8th Ave  
Lewiston, ID 83501  
fee: \$30 Phone: (800) 933-LCSC  
[www.lcsc.edu](http://www.lcsc.edu)

**North Idaho College**  
1000 W Garden Ave  
Coeur d'Alene, ID 83814  
fee: \$25 Phone: (208) 769-3311  
[www.nic.edu](http://www.nic.edu)

**University of Idaho**  
Admissions Office PO Box 444264  
Moscow, ID 83844-3133  
fee: \$40 Phone: (888) 884-3246  
[www.uidaho.edu](http://www.uidaho.edu)

**Start Date:**  Fall, 20\_\_\_\_  Spring, 20\_\_\_\_  Summer, 20\_\_\_\_  Summer/Fall, 20\_\_\_\_

## Applicant Information

**Name:** \_\_\_\_\_ **Name You Prefer:** \_\_\_\_\_  
(as on Soc. Sec. Card) last first middle

**Other Names Appearing on Records:** \_\_\_\_\_

**U.S. Social Security Number:** \_\_\_\_\_ **Date of Birth (mo/day/year):** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Permanent Home Address:** \_\_\_\_\_  
number & street/PO box city county state zip area code phone

**Current Mailing Address:** \_\_\_\_\_  
number & street/PO box city county state zip area code phone

(Address valid until the following date: \_\_\_\_/\_\_\_\_/\_\_\_\_) **E-mail Address:** \_\_\_\_\_

## General Information

**Citizenship:**  USA  Other **Native Language:**  English  Other \_\_\_\_\_

If citizenship is "other," answer the following questions: Country of citizenship: \_\_\_\_\_

Resident Alien of US:  Yes (resident alien number: A- \_\_\_\_\_)  No (current visa type: \_\_\_\_\_)

**Gender:** (optional)  Female  Male **Are you a US Veteran?**  No  Yes Dates of service \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

**Ethnicity:** (optional)  African American/Black  American Indian/Native American/Alaska Native  Asian American  
 Caucasian/White  Hispanic/Latino/Latina  Native Hawaiian or Other Pacific Islander  
 Other \_\_\_\_\_

**Highest level of education attained by either parent:**  Some high school  High school diploma/GED  Some college  
 Associate's degree  Bachelor's degree  Other degree \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_  
(For all to complete; if under 18, list parents or guardians here.) name relationship

number & street/PO box city county state zip area code phone

## Enrollment Information

**Intended Degree Type:**  Certificate  Associate  Bachelor  Second Bachelor  Not Seeking a Degree or Certificate

**Intended Program:**  Academic  Professional Technical

**Intended Major:** (refer to an institution publication for a list of majors available)

\_\_\_\_\_ first choice \_\_\_\_\_ second choice  Undecided

**Enrollment Status:**  New  Transfer  Returning (readmission)  High School Student Seeking Dual Enrollment

**Do you plan to apply for federal financial aid?**  Yes  No

**Campus Location:** If planning to take courses primarily at outreach locations, list these locations: \_\_\_\_\_

**Complete Reverse Side**

Name: \_\_\_\_\_

**Academic Information**

Have you taken the:  ACT: Date \_\_\_\_\_  SAT: Date \_\_\_\_\_  Compass: Date \_\_\_\_\_

List the last high school you attended and any schools since, including colleges, trade schools, correspondence, etc. Do not omit any schools. Attach a separate sheet if more space is needed. Failure to list all schools attended, or submission of inaccurate information, is considered fraud and is cause for refusal of admission or dismissal from the institution. Students seeking certificates of degrees must have official transcripts submitted from each of the schools listed. To be considered official, transcripts must be mailed in a sealed envelop directly from the school to the institution's admissions office.

Did/will you graduate from high school?  No  Yes, month/year \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Do you have a GED or High School Equivalency certificate?  No  Yes, month/year \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

If yes, degree-seeking applicants must submit official GED test scores.

Are/were you a Tech Prep Student?  No  Yes If yes, in which program area did you enroll? \_\_\_\_\_

Name of College, Trade School, etc.	City & State	Dates Attended	Grad Date	Degree	#Credits Earned

**Residency**

Idaho residency status may be determined by one or more of the following. Please check the boxes of all statements that are applicable if claiming Idaho residency for tuition purposes. Residency for community colleges is determined by county of residence.

State of Residence: \_\_\_\_\_ From \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ If less than 12 months, previous state \_\_\_\_\_

County of Residence: \_\_\_\_\_ From \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ If less than 12 months, previous county \_\_\_\_\_

- \*One or more of my parents/legal guardians or spouse's parents is a resident of the State of Idaho and has maintained a bona fide domicile in Idaho for at least one (1) year prior to the opening day of the school term during which I plan to enroll. If I am a community college applicant, I receive at least 51% of my financial support from my parent/legal guardian.  
Parent's name and address \_\_\_\_\_ From \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- I receive less that fifty percent (50%) of my support from parents or legal guardians who are not residents of the State for voting purposes. I have continuously resided in the State of Idaho for at least twelve (12) months before the opening of day of the school term at this institution. I have been employed full-time in Idaho for the past 12 months.
- \*I am a graduate of an accredited Idaho high school and I will attend this institution during the term immediately following graduation. If I am a community college applicant, this item may not be applicable for determining residency.
- I am married to an Idaho resident who is a resident of \_\_\_\_\_ county.
- I am a member of the Armed Forces stationed in the Idaho on military orders, or Idaho is my or my spouse's designated military home of record. I or my spouse is stationed in \_\_\_\_\_ county. Records may be requested.
- One or more of my parents or legal guardians, from whom I receive at least fifty percent (50%) of my support, is a member of the Armed Forces stationed in the State of Idaho. They are stationed in \_\_\_\_\_ county. Records may be requested.
- I have been separated under honorable conditions from the Armed forces after at least two (2) years of service. At the time of separation, I designated the State of Idaho as my intended domicile or indicated Idaho as my home of record of service; and I am entering this institution within one year of the separation date. Records may be requested.
- I have been away from the State of Idaho for a period of less than one (1) calendar year, and have not established legal residence elsewhere. I was a resident of the State of Idaho for a continuous twelve (12) month period immediately prior to departure.
- \*I am a member of one of the following American Indian Tribes: Coeur d'Alene, Shoshone-Paiute, Nez Perce, Shoshone-Bannock, or Kootenai. Records may be requested.

**Signature**

In signing this form, I acknowledge that failure to disclose and submit accurate information may result in denial of admission or dismissal from the institution. I certify that all information provided is complete and true. By signing this application, I certify that I am in compliance with the Federal Military Selective Service Act, 50 U.S.C. sec. 453, or that I am exempt from the same. Men between the ages of 18 and 25 must be registered with the Selective Service to be eligible for enrollment at a state college, to receive state and federal financial aid, and to be employed in a state or federal job. You may register on-line at <http://www.sss.gov>

Acceptance or receipt of financial aid and scholarship award certifies that the funds will be used for educational purposes.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Idaho public colleges subscribe to the principles and laws of the State of Idaho and the Federal Government, including applicable executive orders pertaining to civil rights. These institutions are committed to the policy that all persons shall have equal access to programs and facilities without regard to age, color, creed, marital status, national or ethnic origin, physical handicap, race, religion, or sex.