



# UNDERGRADUATE

## ADMISSION APPLICATION

# UNDERGRADUATE

## APPLICATION FOR ADMISSION

*Complete this application or apply online at [ut.edu/apply](http://ut.edu/apply).  
In addition, the following documents in each category must be received.*

### **Traditional Freshman ▶**

*(currently enrolled in high school; no more than 17 college credits earned)*

- Official high school or secondary school transcript or GED results
- \$40 nonrefundable application fee
- Completed guidance counselor recommendation form (*see pages 7-8*) or letter
- Essay

### **Transfer ▶**

*(17 or more university credit hours completed)*

- Official transcripts from all colleges and universities attended (*even if courses were not completed*)
- \$40 nonrefundable application fee
- Official final high school or secondary school transcript with graduation date posted (*if you have not earned an associate degree*)

### **International ▶**

*(non-U.S. citizen)*

- Official high school or secondary school transcript or GED results
- Official transcripts from all colleges and universities attended (*transfers only*)
- \$40 nonrefundable application fee
- Completed guidance counselor recommendation form (*see pages 7-8*) (*freshmen only*)
- TOEFL examination score (*if English is not your native language*)
- Financial statement form for international students (*see pages 9-10*)
- Essay (*freshmen only*)
- Copy of biographical page of your passport (*if available*)
- International student clearance form (*if currently studying in the U.S.*)

### **Re-admit ▶**

*(previously attended UT but have not been enrolled for more than one year)*

- Official transcripts from all colleges and universities attended since withdrawal from UT
- Personal statement on activities since withdrawal from UT
- \$40 nonrefundable application fee

### **Continuing Studies ▶**

*(may take up to 9 credit hours per semester)*

- Official transcripts
- \$40 nonrefundable application fee

### **Post-baccalaureate degree seeking ▶**

- Official transcript from baccalaureate degree granting institution
- \$40 nonrefundable application fee

### **Transient ▶**

*(visiting)*

- Official transcripts
- \$40 nonrefundable application fee

### **Non-degree seeking and auditor ▶**

- \$40 nonrefundable application fee

*Note: For special circumstances, additional documentation may be required in all categories.*

► **Social Security Number**

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Required for federal financial aid. ☐ If none, please indicate.

► **Name**

(International students: indicate your name exactly as it appears or will appear on your passport.)

☐ Miss ☐ Ms. ☐ Mrs. ☐ Mr. Gender: ☐ Male ☐ Female Birth date (month/day/year) \_\_\_\_\_

Last (family name) \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Jr., etc. \_\_\_\_\_

Usually called (nickname) \_\_\_\_\_ Former last name(s) \_\_\_\_\_

► **Home Address**

(International students: an international address is required. Include street address and P.O. box.)

**Home address** \_\_\_\_\_ Number and street or P.O. box \_\_\_\_\_

City or town \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ ZIP or postal code \_\_\_\_\_ Country \_\_\_\_\_

Home phone (international: country code/city code/number) \_\_\_\_\_ Cell phone number \_\_\_\_\_ Fax number \_\_\_\_\_

Email address (print clearly) \_\_\_\_\_ If Florida resident, date residency established \_\_\_\_\_

► **Mailing Address**

If different from home address, please give your mailing address for Admissions correspondence.

**Mailing address** \_\_\_\_\_ Number and street or P.O. box \_\_\_\_\_

City or town \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ ZIP or postal code \_\_\_\_\_ Country \_\_\_\_\_

Phone number (international: country code/city code/number) \_\_\_\_\_ Fax number \_\_\_\_\_

Failure to answer these questions will delay the processing of your application.

Have you ever been convicted of, committed, pleaded no contest to or had adjudication withheld with respect to a criminal act other than a minor traffic violation? ☐ Yes ☐ No

Are you currently, or have you ever been, charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution? ☐ Yes ☐ No

If yes to either question, please submit a full statement of relevant facts on a separate sheet of paper.

If you are not a U.S. citizen, your response to these items is required for immigration purposes.

City and country of birth \_\_\_\_\_ Country of citizenship \_\_\_\_\_

Are you a permanent resident of the United States? ☐ Yes ☐ No If yes, attach a copy of your Form 12-551 (Green Card) and list your alien registration number. \_\_\_\_\_

If you are currently in the United States and are not a permanent resident, what type of Visa do you have? \_\_\_\_\_  
(Please attach a copy of your Visa and I-94 card.)

Are you Hispanic or Latino? ☐ Yes ☐ No

Check one or more of the following groups in which you consider yourself to be a member:

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Pacific Islander  
☐ White or Caucasian ☐ Unknown ☐ Prefer not to respond

## ADMISSION

Are you applying as:

<input type="radio"/> Freshman	<input type="radio"/> Transfer	<input type="radio"/> Re-Admit
<input type="radio"/> Auditor	<input type="radio"/> Transient (visiting)	<input type="radio"/> Non-Degree Seeking
<input type="radio"/> Post-Baccalaureate Degree Seeking	<input type="radio"/> Continuing Studies (up to 9 credits per term)	
<input type="radio"/> Exchange Student (one semester only)	<input type="radio"/> Exchange Student (one year only)	

Entrance date: Fall (August) 20\_\_\_\_ Spring (January) 20\_\_\_\_ Summer I (May-June) 20\_\_\_\_ Summer II (July-August) 20\_\_\_\_

Will you be attending: ☐ Full time (12 or more credit hours per term) ☐ Part time

If you checked Summer I or II above, do you plan to be a full-time student during the Fall term? ☐ Yes ☐ No

Living arrangements: ☐ Campus ☐ Commute from home ☐ Off campus ☐ Uncertain



Official transcript must be provided. If high school was completed by GED, official copy of test scores and partial high school transcript are required.

Have you selected a major or area of interest? ☐ Yes ☐ No If yes, what is it? \_\_\_\_\_

**International students:** *To be issued an I-20, an academic area of interest must be indicated.*

Please list all high schools or secondary schools you have attended. List present school first:

School name	City	State	Country	Dates Attended
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School name	City	State	Country	Dates Attended
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School name	City	State	Country	Dates Attended
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Phone number of last school attended	Name of your college adviser or guidance counselor
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Graduation date \_\_\_\_\_ Describe your school: ☐ Public ☐ Private

## ► Test Information

**SAT or ACT are optional.** TOEFL test scores are required for both freshmen and transfer non-English speakers. If you have taken other exams (for example, GCSE, WASC or CXC), College Level Examination Program (CLEP) tests, Advanced Placement tests or other equivalent university exams, please indicate below on line marked "Other." Official records of all test scores should be sent directly from the testing agency or your school.

<b>College Board (SAT)</b>	Dates taken	Date to be taken	Highest scores: critical reading/math/writing
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<b>American College Test (ACT)</b>	Dates taken	Date to be taken	Highest composite score
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<b>College Board (SAT subject tests)</b>	Dates taken	Date to be taken	Subjects and scores
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<b>TOEFL (non-English speakers only)</b>	Dates taken	Date to be taken	Highest TOEFL score
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<b>Other</b>	Name of test	Dates taken	Date to be taken
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► Please list **all colleges or universities** where you have taken courses for credit (*whether or not credit was received*), and send an official transcript from each institution as soon as possible. Failure to list all schools could result in your application being denied or your admission being rescinded.

Approximate number of credits completed upon entrance to UT \_\_\_\_\_

Name of college or university	City	State	Country	Dates attended	Graduation date ( <i>if applicable</i> )
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Name of college or university	City	State	Country	Dates attended	Graduation date ( <i>if applicable</i> )
-------------------------------	------	-------	---------	----------------	--

Name of college or university	City	State	Country	Dates attended	Graduation date ( <i>if applicable</i> )
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Name of college or university	City	State	Country	Dates attended	Graduation date ( <i>if applicable</i> )
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Will you complete an associate degree or diploma before transferring to The University of Tampa? ☐ Yes ☐ No

Name of school where associate degree will be earned (*if applicable*) \_\_\_\_\_

Type of associate degree: ☐ Associate of Arts ☐ Associate of Science ☐ Associate of Applied Science

☐ Diploma (*nurses only*) from \_\_\_\_\_ Name of school

Courses in progress this term (*if applicable*) \_\_\_\_\_

Courses you expect to complete prior to transferring to The University of Tampa (*if applicable*) \_\_\_\_\_

▶ **Marital Status**

(International students: if accompanied by dependents, the Family Expenses section on the Financial Statement must be completed.)

☐ Single ☐ Married ☐ Divorced

Spouse's full name (if married)

Occupation

Employer

Number of children

☐ Mr.

☐ Dr.

Father's full name

Home address (if different from yours)

Phone number (international: country code/city code/number)

Cell phone number

Occupation

Employer

Highest education level

☐ Ms.

☐ Mrs.

☐ Dr.

Mother's full name

Home address (if different from yours)

Phone number (international: country code/city code/number)

Cell phone number

Occupation

Employer

Highest education level

Please list all of your siblings' names and ages.

▶ **Your Siblings**▶ **Additional Information**

If you are not living with both parents, with whom do you reside?

Relatives, friends or teachers who have attended or now attend The University of Tampa (list name, relationship and graduation date, if known)

▶ **Employment Information**

(If applicable)

Name of company

Title/position

Does your company have a tuition reimbursement plan?

☐ Yes

☐ No

If yes, what percentage of tuition does it cover?

☐ 75%

☐ 50%

☐ Other

If other, please explain.

▶ **Academic Honors and Extracurricular Activities**

Do you plan to try out for an NCAA Division II sport?

☐ Yes

☐ No

☐ Uncertain

If yes, which sport?

Briefly describe any scholastic distinctions, extracurricular and personal activities since the ninth grade or in college.

Activities in which you participated during high school or college:

☐ Band

☐ Choir

☐ Musical Theater

☐ Piano

☐ Orchestra

List instruments you play.

► **U.S. Citizens and Permanent Residents Only**

Do you wish to be considered for need-based financial aid? ☐ Yes ☐ No  
*(Submit the FAFSA after Jan. 1. It is available online at [fafsa.ed.gov](https://fafsa.ed.gov).)*

Are you eligible to receive veterans benefits? ☐ Yes ☐ No

Have you applied for or received an ROTC scholarship? ☐ Yes ☐ No      Type: ☐ Army ☐ Air Force ☐ Naval

If no, would you like to receive information about ROTC opportunities at The University of Tampa? ☐ Yes ☐ No

OTHER

How did you first hear of The University of Tampa?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you have visited The University of Tampa, when and on what occasion?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADMISSIONS ESSAY

Please write a carefully constructed essay on ONE of the following topics:

☐ What are your three favorite words in the English language? Explain what they mean to you.

☐ Discuss your childhood neighborhood and how it shaped you as a person.

☐ Describe how you feel about the month of February.

☐ If intelligent life does exist on another planet, should humans attempt to make contact? Why or why not?

SIGNATURE

The statements contained in this application are complete and accurate. Falsification of information on this application may result in disciplinary action, denial of admission and invalidation of credits or degrees earned.

I understand that the application fee is nonrefundable.

Applicant's signature

Date

*The University of Tampa does not discriminate on the basis of age, race, color, sex, sexual orientation, gender identity or expression, religion, national or ethnic origin, disability, military or veteran status, marital status, genetic information or any other protected characteristic. This policy of nondiscrimination extends in letter and spirit to all areas of the student's experience at the University.*

► **Traditional Freshmen Only**

Office of Admissions  
401 W. Kennedy Blvd.  
Tampa, FL 33606-1490  
USA  
Tel: (813) 253-6211  
Fax: (813) 258-7398  
[admissions@ut.edu](mailto:admissions@ut.edu)

(FRESHMEN APPLICANTS ONLY)

# GUIDANCE COUNSELOR RECOMMENDATION

*After you have completed the information in this panel, give this form to your guidance counselor. UT will also accept a letter of recommendation from your counselor.*

**Social Security Number**

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☐ If none, please indicate.

► **To the Applicant:**  
*Freshmen  
Applicants Only*

**Student name**

Last (family name)

First

Middle

**Permanent address**

Number and street or P.O. box

City or town

County

State

ZIP/postal code

Country

**Home phone**

**School now attending**

I recognize the confidential nature of this document and I: ☐ Do ☐ Do not waive my right to access

**Student signature**

**Date**

► **To the Counselor:**

The student above is applying to The University of Tampa. Your candid opinion of this student's academic performance, intellectual promise and qualities as a person will be of significant value to the Admissions Committee. Please complete and return this form as soon as possible. Thank you for your help.

How long have you known the applicant? \_\_\_\_\_ Applicant's cumulative grade point average \_\_\_\_\_

Rank in class: Number \_\_\_\_\_ Total number of students \_\_\_\_\_ Number of semesters based on \_\_\_\_\_

► **Academic Rating**

	Below Average	Average	Good	Excellent	No Basis for Judgment
Natural ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Achievement in relation to ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Study habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of written English	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

On the basis of academic ability, how would you recommend this applicant to The University of Tampa?

☐ Highly recommend ☐ Recommend ☐ Recommend with reservations ☐ Not recommended

► **Character and Personality**

	Below Average	Average	Good	Excellent	No Basis for Judgment
Emotional maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Industry and initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cooperation with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect accorded by faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Achievement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

On the basis of character and personal promise, how would you recommend this applicant to The University of Tampa?

☐ Highly recommend ☐ Recommend ☐ Recommend with reservations ☐ Not recommended

(Please see next page.)

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Tampa, FL 33606-1490  
USA  
Tel: (813) 253-6211  
Fax: (813) 258-7398  
admissions@ut.edu

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Guidance counselor's name (print)

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Title

Signed

Date \_\_\_\_\_

School name

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Phone number

Fax number

Email

*Please use the following space for any additional comments you believe would be helpful to the Admissions Committee in assessing the applicant's promise as a successful student at The University of Tampa.*

*When complete, please return to:*

The University of Tampa  
Office of Admissions  
401 W. Kennedy Blvd.  
Tampa, FL 33606-1490  
USA





Office of Admissions  
401 W. Kennedy Blvd.  
Tampa, FL 33606-1490  
USA  
Tel: (813) 253-6211  
Fax: (813) 258-7398  
[admissions@ut.edu](mailto:admissions@ut.edu)



*This Financial Statement must be completed in full by all non-immigrant applicants. Before an I-20 form can be issued for use in obtaining a visa for study in the United States, students must document first-year funds and project the source and availability of funds for each subsequent year. Permanent residents do not need to complete this form but must furnish proof of their permanent status. Submitting this form should not delay your application; it can be sent later.*

## BIOGRAPHICAL

**Name** (List name as on passport): \_\_\_\_\_  
Last (family name) First Middle

**Country of citizenship:** \_\_\_\_\_

**Sex:** ☐ Female ☐ Male **Marital status:** ☐ Single ☐ Married

Are you currently in the U.S.? ☐ Yes ☐ No

If yes, what kind of Visa do you have? \_\_\_\_\_

Does your country restrict dollar exchange? ☐ Yes ☐ No

If yes, what is the maximum dollar amount permitted per student for one year? \$ \_\_\_\_\_

## FAMILY EXPENSES

If you are married and plan to bring dependents, you must certify an additional \$5,000 for each dependent per year. Each dependent is issued their own I-20 form. Dependents who will accompany you:

Name Last (family name), First, Middle	Relationship to student	Date of birth (month/day/year)	Country of birth

► **Source and  
Amounts of  
Financial  
Support  
(in U.S. dollars)**

In computing your expenses, keep in mind that U.S. immigration regulations do NOT allow students holding student visas, or their spouses, to work, except under extraordinary circumstances. Therefore, you should not anticipate employment as a means of support while at the University. Financial documentation must be current and reflect resources within nine months of the date of initial enrollment at The University of Tampa.

**Student personal funds:** \$ \_\_\_\_\_

Enclose a bank statement verifying amount of funds on bank letterhead stationery, signed by a bank official.

**Family sponsor:** \$ \_\_\_\_\_

Sponsor must complete the Affidavit of Support section on this form and provide a bank statement verifying funds on bank letterhead stationery, signed by a bank official.

**Private sponsor:** \$ \_\_\_\_\_

Sponsor must complete the Affidavit of Support section on this form and provide a bank statement verifying funds on bank letterhead stationery, signed by a bank official.

**Government/corporation scholarship/loan:** \$ \_\_\_\_\_

Enclose a certified copy of your letter of award or loan approval.

► **Verification  
of Bank Funds**

This will certify that the funds indicated above are on deposit or are being held in the name of the applicant, family members or sponsors (named above). Verification of amounts is without liability to the financial institution or its officials. Attach separate statements of accounts with official signature/seal.

\_\_\_\_\_  
**Financial institution**

\_\_\_\_\_  
**Title of financial officer**

\_\_\_\_\_  
**Financial officer's signature/seal**

## AFFIDAVIT OF SUPPORT

► To be completed by family  
or private sponsor

**Student name** \_\_\_\_\_ Last (family name) \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

\_\_\_\_\_  
Relationship of sponsor to student

\_\_\_\_\_  
Amount of funds available to student per year

I hereby certify that I agree to provide the funds indicated to the above named student applicant for the purpose of study at The University of Tampa. I will provide this financial support for the duration of the applicant's course of study. If this commitment is not met, the student may be subject to dismissal from the University for non-payment. I have provided bank statements verifying my means of financial support.

\_\_\_\_\_  
Name of sponsor

\_\_\_\_\_  
Address of sponsor

\_\_\_\_\_  
Sponsor's signature

I hereby certify that all of the information on this form is accurate to the best of my knowledge. I will be responsible for all tuition, fees and living expenses incurred during my studies at The University of Tampa. Falsification of information on this application may result in dismissal or non-admission.

\_\_\_\_\_  
**Applicant's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Note: If you are currently studying in the U.S., please request an international clearance form from the Office of Admissions.*

[illegible]

[illegible]