Undergraduate Application
for Admission and Financial Assistance
for Nontraditional Students

Fall 20____  Spring 20____  Summer 20____  Winter 20____ (Saturday term only)
Freshman  Transfer  Full-Time Student  Part-Time Student

PERSONAL DATA/Please type or print.

☐ ☐ ☐ ☐ - ☐ ☐ ☐ ☐ - ☐ ☐ ☐ ☐
Student's Social Security Number

Legal name ________________________________________________________________
Last First Middle (complete) Jr., etc.

Former last name(s), if any ________________________________________________

Date of birth ___________ /_________ /_________
Month Day Year

Gender: ☐ Male  ☐ Female

E-mail __________________________ @ _________________________________

Citizenship: ☐ U.S. citizen  ☐ Eligible noncitizen
(If you are not a citizen or eligible noncitizen, please complete an International Student application.)

Alien registration number ___________________________________________________

Ethnicity: (please check only one of the following) ☐ Hispanic or Latino  ☐ Non-Hispanic or Latino

Race: (please mark one or more races from the following list)
☐ American Indian/Alaskan Native  ☐ Black or African American  ☐ White
☐ Asian  ☐ Native Hawaiian or Other Pacific Islander

City of birth ____________________________________________  What is your first language, if other than English? ___________

Have you taken the TOEFL? ☐ Yes  ☐ No  If yes, when? ___________ /_________
Month Year

Permanent mailing address (for all admission correspondence):

________________________________________________________________________
Street City State ZIP (_____) ___________ Home telephone
________________________________________________________________________
Cell phone

Business employer:
________________________________________________________________________
Street City State ZIP (_____) ___________ Business telephone
________________________________________________________________________

Have you ever attended the University of Hartford? ☐ Yes  ☐ No  If yes, when? From _____________ to _____________

Do you plan to live ☐ in University housing? ☐ in an off-campus apartment/home?

Do you plan to apply for financial assistance? ☐ Yes  ☐ No

If your answer to this question is yes, you must file a Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.gov to be considered for need-based financial assistance. Priority filing date for students applying for full-time enrollment is February 1. Students applying for part-time enrollment should file at least one month prior to registration.

Please indicate with a 1 or 2 the schools/colleges at the University to which you are applying:

___ Barney School of Business  ___ College of Education, Nursing and Health Professions
___ College of Arts and Sciences  ___ College of Engineering, Technology, and Architecture
___ Hillyer College  ___ Interactive Information Technology (multimedia and Web development)
___ The Hartt School (supplemental application required)
___ Hartford Art School (portfolio required)
___ University Studies (BUS program)

Do you plan to pursue an ☐ associate’s degree  ☐ bachelor’s degree or ☐ certificate program?

Indicate the major/certificate program you plan to pursue, if known ____________________________________________________________
PREVIOUS EDUCATION

**a) Secondary level** (high school level)

<table>
<thead>
<tr>
<th>Name of school</th>
<th>Location (city and state)</th>
<th>Date of attendance</th>
<th>Date of graduation</th>
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<tbody>
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If you have previously registered for any college classes, fill out the following section. Please include every college or university in which you have enrolled.

**b) Postsecondary level**

<table>
<thead>
<tr>
<th>Name of institution</th>
<th>Location (city and state)</th>
<th>Credits earned (if any)</th>
<th>Date of enrollment</th>
<th>Degree received or Reason for leaving</th>
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**c) Courses in progress**

<table>
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<tr>
<th>Name of institution</th>
<th>Course title</th>
<th>Credit value</th>
<th>Course number</th>
<th>Date of completion</th>
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The U.S. Department of Higher Education requires proof of high school graduation or its equivalent by all students. This requirement must be fulfilled prior to registration. The requirement may be met with an official final high school transcript, a letter directly from your high school confirming graduation, or an official GED score report. All official documents must be received in a sealed envelope from the appropriate institutions.

Regardless of when the courses were taken, please ask previously attended colleges and universities to forward official copies of your record to the Office of Admission and Student Financial Assistance, University of Hartford, 200 Bloomfield Avenue, West Hartford, CT 06117.

I certify that all items on this application are answered correctly and completely. I understand that incomplete information, the withholding of information, or incorrect information may disqualify me for admission to the University of Hartford or may later be the basis for my withdrawal or dismissal.

Student's signature _____________________________________________________________ Date ______________________

The University of Hartford admits students without regard to race, age, color, creed, gender, physical ability, sexual orientation, or national or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students of the University.

**A $35 NONREFUNDABLE APPLICATION FEE MUST ACCOMPANY THIS APPLICATION.**

Please return this application to Office of Admission and Student Financial Assistance University of Hartford 200 Bloomfield Avenue West Hartford, CT 06117 Phone: 860.768.4296 or 800.947.4303 Fax: 860.768.4961