

COLLEGE OF EDUCATION
Application for Admission to Institute Status
University of Maryland, College Park



UNIVERSITY OF MARYLAND
COLLEGE OF EDUCATION
EDUCATIONAL TECHNOLOGY OUTREACH

* Name: (Last, First, MI): _____

Email: _____

Social Security Number: _____ Other Name: _____

Mailing Address: Street _____

City/State/Zip _____ County (if MD) _____

Home Phone: _____ Work Phone: _____

Gender: Male _____ Female _____ Birthdate (m/d/yr): _____

*This information is requested for the purpose of determining compliance with federal civil rights laws. Completion is optional

*Ethnicity (check one): _____ White, not of Hispanic Origin _____ Asian or Pacific Islander
_____ American Indian/Alaskan Native _____ Black, not of Hispanic Origin
_____ Hispanic _____ Other

Citizenship: US _____ Other: _____ Country of Citizenship: _____

Type of Visa : _____

Alien Registration Number: _____

Date Issues: _____ Expires: _____

* Have you ever applied to the University of Maryland in the past? Yes _____ No _____
If yes, Dates of attendance: _____ Degree earned: _____

*List previous institutions you have attended, dates, and any degrees awarded:

Name of Employer: _____

Address of Employer: _____

Title/Name of Institute: _____

Location of Institute: _____

Dates of Institute: _____

NOTE: The following questions MUST be answered in order to process your application.

- * 1. Has disciplinary action been taken against you at any of the institutions you have attended, including the University of Maryland? Yes _____ No _____
2. Have you ever been indicted for, pleaded guilty to, or been found guilty of any criminal offense excluding minor traffic violations? (if yes, you must attach a statement describing the incident and its resolution to this form. Yes _____ No _____

* Applicant Signature

Date

* These must be completed for processing.