

Application Worksheet

Transfer Admissions Application Timeline

<i>Entry Term</i>	<i>Application Deadlines</i>	<i>Notification Date</i>
Fall Semester	Rolling Admission	3-4 weeks after all documents received
Spring Semester	Rolling Admission	3-4 weeks after all documents received
Processing Time	Applications are reviewed on a space available basis	3-4 weeks after all documents received

Transfer Application Checklist

<i>Date Completed</i>	<i>Item</i>	<i>Mailed or Given to</i>
_____	Application and Fee	FTCM Office of Student Financial Services
_____	Completed application form	FTCM Office of Admissions
_____	Academic transcripts from all colleges you have attended	FTCM Office of Admissions
_____	High school transcript and SAT or ACT scores are required if you have completed less than 24 semester hours at the time of application	FTCM Office of Admissions
_____	Video file or DVD for Dance program applicants	FTCM Office of Admissions via email or mail
_____	FTCM Scholarship application form (if applying)	FTCM Office of Student Financial Services
_____	FTCM Financial Aid application form (if applying)	FTCM Office of Student Financial Services

Application for Transfer Admission

Personal Information

Legal Name

Last/Family/Surname

First/Given

Middle

Suffix (Jr., etc)

Social Security Number (if available)

Gender

Male

Female

Permanent Address

Street

Apt

City

State

Zip

Phone

Date of Birth

/

/

Current number

Mobile number

Month

Day

Year

Email

Application Status

• Are you applying for admission as a	Freshman	Transfer
• Are you applying under FTCM's Early Decision Plan?	Yes	No
• Are you applying for financial aid?	Yes	No
• Please indicate the term and calendar year you plan to enroll.	<input type="checkbox"/> Fall Calendar Year	<input type="checkbox"/> Spring _____
• Do you wish to enroll as a full-time or part-time (fewer than 12 credits/semester) student?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
• Have you applied to FTCM before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, when?	_____

Program Selection

First-choice Program

Major (Be sure to write the full name, including concentration if appropriate)

Alternate Program Selection

If we are unable to offer you admission to your first-choice program, and you would like to be considered for alternate programs, please list them below in order of preference.

(Be sure to write the full name, including concentration if appropriate)

Application for Transfer Admission

Citizenship

<ul style="list-style-type: none"> • Are you a U.S. Citizen? • If no, do you have a visa that allows you study in the U.S.? 	Yes No Permanent Resident Yes (please indicate visa type) _____ <input type="checkbox"/> No
<ul style="list-style-type: none"> • Citizenship (if not U.S.) _____ 	<ul style="list-style-type: none"> • Country of Birth _____
<ul style="list-style-type: none"> • If you live in the U.S., but are not U.S. Citizen, how many years have you lived in the country? _____ 	
<ul style="list-style-type: none"> • Language spoken at home (if not English) _____ 	<ul style="list-style-type: none"> • Your first language (if not English) _____

Educational Data *(Skip this section if providing transcripts and report of test scores)*

Please list below any schools you have previously attended and any you are currently attending, indicating the most recent school first.

High School(s) Attended

CEEB Code (if known)	Name and Address of High School	Starting Month/Year	Ending Month/Year	Date of Graduation & GPA
	Name			
	Address			
	Name			
	Address			
	Name			
	Address			

College(s) Attended *(Please provide information below and review academic transcript requirements on page 3.)*

CEEB Code (if known)	Name and College and Major Field (including FTCM)	Starting Month/Year	Ending Month/Year	Degrees Received
	1			
	2			
	3			

Test Scores *(Indicate the date on which you plan to take the required test. If you have already taken a test, indicate your score)*

Test Type (SAT, ACT, TOEFL, or IELTS)	Test Scores	Date Taken or Date to be Taken

Application for Transfer Admission

School and Community Activities *(Skip this section if providing resume)*

Please list the activities in which you have been most involved. Include years participated, leadership positions)

Activity	Participated during		Hours per Week	Weeks per Year	Positions Held, Honors Received	Participate at FTCM?
	High School	College				

Work Experience *(Skip this section if providing resume)*

Please list any work experience (including summer jobs) during the past three years

Employer	Position/Job Description	Dates of Employment	Hours/Week

Personal Conduct

- Have you ever been subjected to disciplinary action by any school, college, or university, or convicted of a violation of any state or federal law, other than a minor traffic violation?

Yes No

- If you answered yes, please provide an explanation and the approximate dates of each incident. Please attached your response to the end of the application.

Personal Statement

- In a one-to-two-page essay, please describe your academic interest, ability and achievements, and explain why you wish to attend FTCM. You must put your full name, date of birth, and name of college on each sheet, and attach submit with with your application documents.

Family Information

Relative	Full Name	Occupation	Education <i>(List Degrees and College Attended)</i>	Do you Live with?
Parent 1				<input type="checkbox"/>
Parent 2				<input type="checkbox"/>
Brother or Sister				<input type="checkbox"/>
Brother or Sister				<input type="checkbox"/>
Spouse				<input type="checkbox"/>

Parent 1

Home Address (if different than yours)

Email Address

Phone

Parent 2

Home Address (if different than yours)

Email Address

Phone

- Are you a FTC employee or a dependent of a FTC employee Yes No
- Did one or both of your parents, or any siblings, graduate from FTC? Yes No
- Please list the names of any family member currently attending FTC: _____

Optional Information

The following questions are optional, and will not affect your application. Any information provided will remain confidential. If you wish to be identified with a particular ethnic or racial group, please indicate how you would describe yourself:

Ethnicity	Hispanic or Latino	Not Hispanic or Latino
Race <i>(Please select one or more)</i>	Asian Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native Black or African American White

Other surname used
(on school transcripts, etc.) _____

Additional Information

If you have additional information that was not specifically requested on the application or did not fit in the space provided, please include it here, and attach additional sheets at the end of the application if necessary.

Signature and Date

Signature _____

Date _____

My signature above indicates that all information provided in this application is complete, factually correct, and honestly prepared. I understand that any misrepresentation may result in refusal or cancellation of admission, or suspension from classes if discovered after I have commenced my studies at FTCM.