

Arkansas Tech University-Ozark Campus Application for Admission

www.atu.edu/ozark

Please complete all information legibly and accurately. Please use blue or black ink – no red ink or pencil.

Semester for which you are applying: (choose the earliest term in which you intend to enroll.)										
Year:	□Fall	□Spring	□Summer							
1) Social Security Number	2) Legal Name: Last		First	Middle						
3) Other names (maiden, etc.)										
4) Mailing Address: County										
City	State Zip									
Daytime Telepho	ne Number ()		Email							
5) Are you a legal Arkansas resident (must have resided in Arkansas more than six months)?										
6) Date of Birth: Month Day Yea 8) Ethnic Origin:* (Select one of the selection of the selectio	ne following) not Hispanic/Latino) Native	9) Citizenship: U.S. Citi Resident Country Non-Citi	izen Alien (immigran of Citizenship	t) A copy of Resident Alien Card is required.						
*This information will only be used in nondiscriminatory manner consistent with applicable civil rights laws for reporting and statistical purposes only and cannot affect your eligibility for admission.										
, 2 3		First Name MI								
	Relationship									
City State Zip Daytime Phone No. 11) Please choose a course of study: Air Conditioning and Refrigeration										
14) Are you registered with Selective Services? ☐ Yes ☐ No, for the following reason (check one): ☐ Female ☐ A permanent resident of the trust territory of the Pacific Islands or the Northern Marian Islands ☐ Under the age of 18 ☐ An alien lawfully admitted to the United States as a non-immigrant ☐ Born before 1960 ☐ In the armed forces on active duty (members of Reserves or National Guard are not considered active duty)										

15) If you have ever <u>enrolled</u> for college credit courses, et please list college below, even if you did not complete a full falsification of records and may result in cancellation of students.	term or receive a	grade report. Failu	re to list all colle	ges is c					
Name of College, University, or Technical Institute	City/State	Dates Attended (if applicable)	Degree	Credit Hours Earned	Cur	t Hours rently colled			
1. Arkansas Tech University-Ozark Campus (prior to July 1, 2003 was Arkansas Valley Technical Institute)	Ozark, AR	_	_						
2. Arkansas Tech University, Russellville Campus	Russellville, AR								
3.									
4.									
5.									
16) Name of High School		OR GED							
City State		City		S	State				
			Date GED awarded:						
To maintain a safe learning community, we ask the following questions of all applicants. We cannot process your application unless you answ these questions. Answering "yes" to one or more of the following questions will not necessarily preclude you from being admitted. However, failure to provide complete, accurate, and truthful information will be grounds to deny or withdraw admission, or to dismiss after enrollment. 1) Have you ever been convicted of, or pleaded no contest to, a crime other than a minor traffic violation? 2) Do you have any criminal charges pending against you? 3) Have you ever been expelled, dismissed, suspended, or placed on probation by any other school, college, or university? 4) If you have ever served in the military, did you receive any type of discharge other than an honorable discharge? You must promptly notify the Office of Student Services of any criminal charge, any disposition of a criminal charge, or any school, college, or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you su this document.									
18) I hereby affirm that all information supplied on this a information requested or giving false information may make that I shall not be considered for admission to Arkansas Techin the Admission Checklist below. My signature also gran University-Ozark Campus to access my academic (e.g. hi understand that withholding information requested or given rollment. Your full legal name (please print legibly)	me ineligible for h University-Ozar ts permission to t gh school and col ving false inform	admission and enro c Campus until I ha he Office of Stude lege transcripts) a ation may make n	ollment. Also, it is ave submitted all ents Services of A and immunization in eineligible for a	is my u credent Arkans on reco	ndersta tials sp sas Tec rds. I	anding ecified e h			
Your full legal name (please print legibly) Applicant's Signature									
Admission Checklist Deliver or mail the following documents to: Office of Student Services, 1700 Helberg Lane, Ozark, AR 72949.									
☐ Placement scores (ACT, SAT or Compass unless have grade C or better in Math <u>and</u> English course work from an accredited institution).									
☐ Official high school transcript or GED Score Report (unless have 24 or more hours of transferrable college work from an accredited institution).									

Arkansas Tech University-Ozark Campus does not discriminate on the basis of color, sex, race, age, national origin, genetic information or disability in any of its practices, policies or procedures. This includes, but is not limited to, admission, employment, financial aid or educational service. Arkansas Tech University-Ozark Campus complies with all applicable state and federal laws including, but not limited to, Title VI and Title VII of the Civil rights Act of 1964 as amended, Title IX of the Educational Amendment of 1972, Section 504 of the Rehabilitation Act Amendments of 1974, the Civil rights Restoration Act of 1987, the Americans With Disabilities Act of 1990, and the Civil Rights Act of 1991. Social Security numbers are used as identification numbers for convenience and for consistency with other records. The Affirmative Action Office, Main Building Ozark Campus, has been designated to coordinate compliance efforts.

☐ Official college transcript(s) from each institution attended, other than Arkansas Tech University or Arkansas Valley Technical Institute.

☐ Immunization records (documenting two (2) immunizations against measles, mumps, and rubella (MMR)).