

MILITARY AND VETERAN UNDERGRADUATE APPLICATION FOR ADMISSION AND ENROLLMENT AGREEMENT

Please print or type all information requested and review responses for accuracy.

FOR OFFICE USE ONLY

Special Population

Third Party

Social Security Number (USA) (Federal Aid applicants are required to provide their SSN)

Current legal name

Last (Family) name

First (Given) name

Middle initial

Birth/maiden name (If different from current last name)

Other name(s) (By which you may have been identified in relevant academic records)

Permanent address

Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable)

City

State

Zip code

Country (If not USA)

Mailing address

Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable)

City

State

Zip code

Country (If not USA)

Contact information (Indicate (D)ay or (E)vening)

Home phone

(d)/(e)

Business phone

Extension

(d)/(e)

Mobile phone

(d)/(e)

Email address

Electronic Communications Consent

Academic Evaluations

Whenever the College evaluates the credits you have earned, you will receive your My Academic Plan, the document that explains how credits earned will apply toward your academic program and which credits you still need to earn. We will notify you via email each time your academic plan is updated, and you can view this document at the Excelsior College website conveniently and without delay. Please make certain that you complete your email address above.

If you do not wish to receive electronic delivery of your academic evaluations, check this box to receive these documents in printed form.

Excelsior College Updates

No, I do not wish to receive Excelsior College updates via email broadcasts.

If you answer **yes** to subscribe to this service, be sure to add **no-reply@excelsior.edu**, **TechSupport@excelsior.edu**, or the **excelsior.edu** mail server to your email software's address book or allowed list. If you are using a spam filter or blocker that requires confirmation from the sender or is set to reject email from certain domains, this procedure is necessary in order to ensure that you receive Excelsior College correspondence.

Date of birth (mm/dd/yyyy format) _____

Gender

Have you graduated from high school, received a GED, or completed a High School Equivalency Test in the past 12 months?

- It has been longer than 12 months since I graduated from high school, earned my GED or High School Equivalency Test
 Yes, I graduated from high school in the past 12 months. Yes, I have obtained my GED or High School Equivalency Test in the last 12 months.
 No

Since completing high school, have you taken at least one course in any college, university, or technical school? Yes No

If yes, list all previously earned degree(s):

TYPE OF DEGREE	DATE DEGREE EARNED	INSTITUTION GRANTING DEGREE	CHECK IF YOU ARE SENDING A TRANSCRIPT
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

See page 5 for information regarding transcripts.

From the list below, enter the code number which represents your estimate of the total number of college credits you have earned through college courses, proficiency tests, military courses, and so forth.

- 1:** No credit/courses | **2:** 1 to 30 credits | **3:** 31 to 60 credits | **4:** 61 to 90 credits | **5:** 91 to 126 credits | **6:** Over 126 credits | **7:** I don't know

Are you Hispanic or Latino/Latina? Yes No

Select the racial/ethnic group(s) you identify with regardless of your answer to the above question (you may select more than one):

- American Indian or Alaska Native Black or African American White Asian Native Hawaiian or Other Pacific Islander

Please select the one response which best reflects your citizenship status: U.S. citizen U.S. permanent resident Foreign national

Is English your first language? Yes No

If you are currently serving in the United States Armed Services, enter the two digit code number of the branch:

10 Army (Regular)	30 Marines (Regular)	50 Coast Guard (Regular)
15 Army (Reserves)	35 Marines (Reserves)	55 Coast Guard (Reserves)
20 Navy (Regular)	40 Air Force (Regular)	60 National Guard (Army)
25 Navy (Reserves)	45 Air Force (Reserves)	65 National Guard (Air)

MOS, NER, CGR, etc. Base zip code - Pay Grade

Other military status: Military veteran Military family member with Department of Defense card Department of Defense civilian employee

Military ID Number _____

If you are eligible or currently receiving GI Bill benefits, enter the code number of the chapter:

70 MGIB-AD (Chapter 30)	95 Educational Assistance Test Program (Section 901)	115 Vocational Rehabilitation
75 MGIB-SR (Chapter 1606)	100 Educational Assistance Pilot Program (Section 903)	999 Not sure
80 REAP (Chapter 1607)	105 Survivors' and Dependents' Educational Assistance Program (Chapter 35)	
85 VEAP (Chapter 32)	010 Post-9/11 (Chapter 33)	

Have you used your benefits previously? Yes No If not, have you completed VA form 22-1990? Yes No

If you have used your benefits and are changing parent schools, have you completed VA form 22-1995? Yes No

If you answered No, complete the correct form online at www.gibill.va.gov.

Have you ever been enrolled in any program at Excelsior College (formerly Regents College)?

Yes No If Yes, when? _____

Undergraduate Degree Selection (Select only one program)

BUSINESS

- AAB** Associate in Applied Science in Administrative/Management Studies
- BPB** Bachelor of Professional Studies—Business and Management
- BSB** Bachelor of Science in Business
Area of concentration (select one).
 - ACCTG General Accounting
 - FIN Finance
 - GENBU General Business
 - LM Logistics Management
 - MHR Management of Human Resources
 - MARK Marketing
- MSB** Bachelor of Science in Business/Master of Business Administration Dual Degree Track
Area of undergraduate concentration (select one).
 - ACCTG General Accounting
 - FIN Finance
 - GENBU General Business
 - LM Logistics Management
 - MHR Management of Human Resources
 - MARK Marketing*Area of graduate-level concentration (select one).*
 - No concentration
 - ACCT Accounting
 - HCM Health Care Management
 - HR Human Resource Management
 - LDR Leadership

HEALTH SCIENCES

- AHS** Associate in Science in Health Sciences
- BHS** Bachelor of Science in Health Sciences
Area of emphasis (select one).
 - HAW Health and Wellness
 - MGT Management
 - PBH Public Health
- BHC** Bachelor of Science in Health Care Management
- MHA** Bachelor of Science in Health Care Management/Master of Business Administration Dual Degree Track
Area of graduate-level concentration (select one).
 - No concentration
 - ACCT Accounting
 - HCM Health Care Management
 - HR Human Resource Management
 - LDR Leadership
- MBH** Bachelor of Science in Health Sciences/Master of Science in Health Sciences
Area of undergraduate emphasis (select one).
 - HAW Health and Wellness
 - MGT Management
 - PBH Public Health*Area of graduate-level specialization (select one).*
 - No specialization
 - PH Public Health

LIBERAL ARTS

- AS** Associate in Science in Liberal Arts
- BSL** Bachelor of Science in Liberal Arts
Area of concentration (select one).
 - No concentration
 - LOG Logistics
 - PH Population Health
 - PTW Professional and Technical Writing
- BS** Bachelor of Science in History
- BS** Bachelor of Science in Natural Sciences
Area of concentration (select one).
 - NATSC No concentration
 - BIO Biology
- BS** Bachelor of Science in Psychology
- BS** Bachelor of Science in Social Sciences
Area of concentration (select one).
 - SOCSC No concentration
 - HR Human Services
- BAL** Bachelor of Arts in Liberal Arts

Public Service

- ACJ** Associate in Science in Criminal Justice
- BSP** Bachelor of Science in Criminal Justice
Area of concentration (select one).
 - No concentration
 - CJ-H Homeland Security
- BHE** Bachelor of Science in Homeland Security and Emergency Management
Area of emphasis (select one).
 - OP Open Emphasis
- BSP** Bachelor of Science in Military Leadership
- BSP** Bachelor of Science in National Security
Area of concentration (select one).
 - INSA Intelligence and Security Analysis
 - TOPIC Topics in National Security

TECHNOLOGY

- AAT** Associate in Applied Science in Technical Studies
Military students should select the concentration which corresponds to their MOS/Rating.
Area of concentration (select one).
 - COMPT Computer Technologies
 - ELECT Electromechanical Technologies
 - ELINT Electronic/Instrumentation Technologies
 - NCPPT Nuclear Technologies/ Power Plant Technologies
- BCY** Bachelor of Science in Cybersecurity
Area of concentration (select one).
 - GEN General
 - COPS Cyber Operations
- BPT** Bachelor of Professional Studies—Technology Management
Area of concentration (select one).
 - EL Electrical Technology
 - IT Information Technology
 - NU Nuclear Technology
 - RE Renewable Energy Technology
- BEL** Bachelor of Science in Electrical Engineering Technology (ABET accredited)
Area of concentration (select one).
 - ELEC Electronics
 - NANO Nanotechnology
 - POWER Power Systems

TECHNOLOGY (continued)

- BIX** Bachelor of Science in Information Technology
Area of concentration (select one).
 - CYS Cybersecurity Technology
 - GEN General
- BNX** Bachelor of Science in Nuclear Engineering Technology (ABET accredited)
Area of undergraduate concentration (select one).
 - General
 - NC Nuclear Cybersecurity
 - NL Nuclear Leadership
- MNT** Bachelor of Science in Nuclear Engineering Technology (with concentration)/Master of Business Administration Dual Degree Track
Area of undergraduate concentration (select one).
 - General (no concentration)
 - NC Nuclear Cybersecurity
 - NL Nuclear Leadership*Area of graduate-level concentration (select one).*
 - General (no concentration)
 - ACCT Accounting
 - HCM Health Care Management
 - HR Human Resource Management
 - LDR Leadership
- MIC** Bachelor of Science in Information Technology (with concentration)/Master of Science in Cybersecurity Dual Degree Track
Area of undergraduate concentration (select one).
 - GEN General
 - CYS Cybersecurity Technology*Area of graduate-level concentration (select one).*
 - GEN General
 - INFAS Information Assurance
- MBI** Bachelor of Science in Information Technology/Master of Business Administration Dual Degree Track
Area of undergraduate concentration (select one).
 - GEN General
 - CYS Cybersecurity Technology*Area of graduate-level concentration (select one).*
 - No concentration
 - ACCT Accounting
 - HCM Health Care Management
 - HR Human Resource Management
 - LDR Leadership

Active Duty/Guard/Reserve Military Authorization

As a student enrolling in Excelsior College, I agree to respond promptly to information requested by either my ESO/Education Counselor or Excelsior College regarding my studies, to notify my ESO/Education Counselor and Excelsior College of any change in name, address, or Social Security number, and to meet all of my financial obligations to Excelsior College. Since my ESO/Education Counselor will assist me in planning a course of study, I have authorized my ESO/Education Counselor to submit official documents on my behalf. I also authorize Excelsior College to release to my ESO/Education Counselor pertinent information regarding my status in Excelsior College, including copies of My Academic Plan and other information related to my studies and status in the program.

Signature _____

Date _____

Joint Services Transcript (By checking this box I authorize Excelsior College to request my Joint Services Transcript)

Education Center Address

Employer Information

Are you currently employed? No Yes, part-time Yes, full-time

If employed, who is your employer?

Name of employer

Number and street address of employer _____

State _____

Zip code _____

Country (if not USA) _____

If employed, what is your job title?

Job title

Check the appropriate box(es) for any degree(s) you have already earned: Associate Baccalaureate

Parental Education Level

	Mother	Father
Did not finish high school	<input type="checkbox"/>	<input type="checkbox"/>
Attended some college but did not graduate	<input type="checkbox"/>	<input type="checkbox"/>
Completed an associate degree (AA, AS, AAS, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a bachelor's degree (BA, BS, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a master's degree (MA, MS, MBA, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a doctorate degree (PhD, JD, MD, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Do not know	<input type="checkbox"/>	<input type="checkbox"/>

Your annual household income

<input type="checkbox"/> Less than \$24,999	<input type="checkbox"/> \$70,000 to \$84,999
<input type="checkbox"/> \$25,000 to \$34,999	<input type="checkbox"/> \$85,000 to \$99,999
<input type="checkbox"/> \$35,000 to \$44,999	<input type="checkbox"/> \$100,000 to \$119,999
<input type="checkbox"/> \$45,000 to \$54,999	<input type="checkbox"/> Over \$120,000
<input type="checkbox"/> \$55,000 to \$69,999	

Documents Submitted for Evaluation

Transcripts

List each institution that will be submitting official transcripts on your behalf. Only list institutions from which you have previously earned college-level credits and that you would like to be considered. We will process your application once all official transcripts listed have been received. Do not submit unofficial transcripts as they cannot be used to evaluate your prior credits. Official transcripts are those that a college, testing agency, or education office submits directly to: **Excelsior College, Office of Registration and Records, 7 Columbia Circle, Albany, NY 12203-5159.**

Note: The issuance date of the transcript must be within three weeks or less and must have two forms of ID on the transcript (e.g. social security number and current address, current address and date of birth, last four numbers of your social security number and date of birth).

Official transcripts must be submitted at the request of the student. Excelsior College does not request transcripts on the student's behalf. Excelsior College reserves the right to verify all transcripts/documents received to ensure authenticity. Submission of fraudulent documents will result in academic dismissal from the College.

Name of college/university	City	State
Name of college/university	City	State
Name of college/university	City	State

Military/Professional Training

All military branches except Air Force list Joint Services Transcript (JST); Air force enlisted personnel list Community College of the Air Force

Organization
Organization
Organization

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Signature and Date (Required)

I certify that the above statements are true and correct. I understand that false information or documents may result in dismissal from the College; and that it is my responsibility to submit all required information. I agree that if accepted for enrollment in the College, I will comply with and be bound by all requirements and policies of the College, as set forth in this form, the student policies webpage, and the catalog pertaining to the program in which I am seeking to enroll. My signature below indicates I have read the Required State Disclosure Notifications presented on the Excelsior College website (www.excelsior.edu/about/transparency).

I understand that in order to be considered an enrolled student at Excelsior College, I must engage in credit-bearing activity within six months of submission of this Enrollment Agreement. Credit-bearing activity at Excelsior College includes registering for an Excelsior course or exam and/or transferring in new credit (this must be credit that does not appear on the initial evaluation). Failure to engage in credit-bearing activity within six months will result in the expiration of my admission status, at which point I would be required to re-apply. I have also read and understand the multi-source fee refund policy included in the tuition and fee schedules and have read and understand the requirements for the enrollment option I selected as listed on the payment options page of this form.

Signature

Date



MILITARY AND VETERAN IDENTITY VERIFICATION

► If you are unable to complete the identity verification online, complete all information on this form in the presence of a Notary or Excelsior College employee **or** Military/Veterans who are stationed OCONUS, have your Military Commanding Officer sign this form.

Name (first, last)

Last 4 digits of SSN

Student ID Number

Type of valid, government-issued, photo identification viewed by **Signee**:

Driver's License (or other state-issued photo ID)

Passport

Other (valid, government-issued photo ID) _____

Student (must sign)

I attest that I am the above named person.

Signature

Date

Excelsior College Employee/Military Commanding Officer identification verification

I attest that I, _____ have viewed the above photo identification
and verify the identity of _____ for the purposes of attending Excelsior College.

signature

Date

Notary identification verification

State of

County of

I hereby certify that on this _____ day of _____, 20____ personally appeared before me the signer and subject of the above form,
who signed or attested to the same in my presence and presented the above valid form of identification as proof of his or her identity:

Notary Public (Print name)

Commission expiry date

Notary Public Signature

Mail, email or fax your completed Identity Verification form to:
Excelsior College, Center for Military and Veteran Education
7 Columbia Circle, Albany, NY 12203-5159
EMAIL: military@excelsior.edu
FAX: 518-608-8142



**EXCELSIOR
COLLEGE®**

7 Columbia Circle, Albany, New York 12203-5159
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