University of Maryland, Baltimore County
First Year Application
FALL 2016 TERM ONLY

Academics

- What is your intended major: (choose from list below):

- If you are interested in a second major, please indicate your intended second major: (choose from list below):

- Indicate if you intend to pursue any of the following after graduation:
  Pre-Dentistry
  Pre-Law
  Medicine
  Optometry
  Physical Therapy
  Podiatry
  Veterinary Medicine

Contacts

Have you previously applied to UMBC - University of Maryland, Baltimore County? (Yes/No)
Date (month/year):
How have you learned about UMBC - University of Maryland, Baltimore County?

Majors:

Acting – BFA
Africana Studies – BA
American Studies – BA
Ancient Studies – BA
Asian Studies – BA
Biology Education – BA
Biochemistry & Molecular Biology – BS
Bioinformatics & Computational Biology – BS
Biological Sciences – BA/BS
Business Technology Education – BA
Chemistry – BA/BS
Chemistry Education – BA
Chemical Engineering – BS
Computer Engineering – BS
Computer Science – BS
Cultural Anthropology – BA
Dance – BA
Economics – BA
Emergency Health Services – BS
Engineering – BA
English – BA
Environmental Science – BS
Environmental Studies – BA
Financial Economics – BS
French
Gender & Women’s Studies – BA
Geography & Environmental Systems – BA/BS
Global Studies – BA
Health Administration & Policy - BA
History – BA
Information Systems – BS
Interdisciplinary Studies – BA/BS
Management of Aging Services – BA
Mathematics – BA/BS
Mechanical Engineering – BS
Media & Communication Studies – BA
Modern Languages & Linguistics – BA
Music - BA
Music – Composition
Music – Education
Music – Instrument Performance
Music – Jazz
Music – Performance/Musicology
Music – Recording
Music – Undecided
Music – Vocal Performance
Philosophy – BA
Physics – BS
Physics Education – BA
Political Science – BA
Pre-Dental Hygiene
Pre-Nursing
Pre-Pharmacy
Psychology – BA/BS
Russian
Social Work – BA
Sociology - BA
Spanish
Statistics - BS
Theatre – Theatre Studies
Theatre – Design & Production
Undecided - BA
Visual Arts – Animation/Interactive Media – BFA
Visual Arts – Art History
Visual Arts – Film/Video - BFA
Visual Arts – Graphic Design
Visual Arts – Photography - BFA
Visual Arts – Print Media – BFA
Visual Arts - Undecided

Spanish
Statistics - BS
Theatre – Theatre Studies
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Visual Arts – Print Media – BFA
Visual Arts - Undecided

Spanish
### Applicant

**Legal Name**  
Last/Family/Sur (Enter name exactly as it appears on official documents.)
Preferred name, if not first name (only one)

**Birth Date**  
mm/dd/yyyy  
O Female  O Male

**Preferred Telephone**  
O Home  O Cell

**E-mail Address**

**Permanent home address**  
Number & Street  
Apartment #

**City/Town**  
County or Parish  
State/Province  
Country  
ZIP/Postal Code

If different from above, please give your current mailing address for all admission correspondence.

**Current mailing address**  
Number & Street  
Apartment #

**City/Town**  
County or Parish  
State/Province  
Country  
ZIP/Postal Code

If your current mailing address is a boarding school, include name of school here:

### Future Plans

Your answers to these questions will vary for different colleges. If the online system did not ask you to answer some of the questions you see in this section, this college chose not to ask that question of its applicants.

**College**

**Entry Term:**  
O Fall (Jul-Dec)  O Spring (Jan-Jun)

**Decision Plan**

**Academic Interests**

**Career Interests**

### Demographics

**Citizenship Status**

**Non-US Citizenship(s)**

**Birthplace**  
City/Town  
State/Province  
Country

**Years lived in the US?**  **Years lived outside the US?**

**Language Proficiency (Check all that apply)**

<table>
<thead>
<tr>
<th>Language</th>
<th>English</th>
<th>Spanish</th>
<th>French</th>
<th>Italian</th>
<th>German</th>
<th>Other</th>
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**Optional** The items with a gray background are optional. No information you provide will be used in a discriminatory manner.

**Religious Preference**

**US Armed Services veteran status**

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FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

**Household**

Parents’ marital status (relative to each other): ○ Never Married ○ Married ○ Civil Union/Domestic Partners ○ Widowed ○ Separated ○ Divorced (date ________)

With whom do you make your permanent home? ○ Parent 1 ○ Parent 2 ○ Both ○ Legal Guardian ○ Ward of the Court/State ○ Other mm/yyyy

If you have children, how many? _______

---

**Parent 1**

○ Mother ○ Father ○ Unknown

Is Parent 1 living? ○ Yes ○ No (Date Deceased ________)

---

**Parent 2**

○ Mother ○ Father ○ Unknown

Is Parent 2 living? ○ Yes ○ No (Date Deceased ________)

---

**Former last name(s)**

Country of birth

Home address if different from yours

---

Preferred Telephone: ○ Home ○ Cell ○ Work (______) Area/Country/City Code

E-mail

Occupation

Employer

College (if any) CEEB

Degree ________ Year

Graduate School (if any) CEEB

Degree ________ Year

---

**Legal Guardian (if other than a parent)**

Relationship to you

---

Country of birth

Home address if different from yours

---

Preferred Telephone: ○ Home ○ Cell ○ Work (______) Area/Country/City Code

E-mail

Occupation

Employer

College (if any) CEEB

Degree ________ Year

Graduate School (if any) CEEB

Degree ________ Year

---

**Siblings**

Please give names and ages of your brothers or sisters. If they are enrolled in grades K-12 (or international equivalent), list their grade levels. If they have attended or are currently attending college, give the names of the undergraduate Institution, degree earned, and approximate dates of attendance. If more than three siblings, please list them in the Additional Information section.

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**College Attended**

<table>
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<tr>
<th>Name</th>
<th>Age &amp; Grade</th>
<th>Relationship</th>
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Degree earned or expected Dates mm/yyyy – mm/yyyy

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Degree earned or expected Dates mm/yyyy – mm/yyyy

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Degree earned or expected Dates mm/yyyy – mm/yyyy

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EDUCATION

Secondary Schools
Most recent secondary school attended

Entry Date mm/yyyy graduation Date mm/dd/yyyy

School Type: ○ Public ○ Charter ○ Independent ○ Religious ○ Home School

Address

Number & Street

City/Town State/Province Country ZIP/Postal Code

Counselor’s Name Telephone ( ) Fax ( )

Area/Country/City Code Number Ext. Area/Country/City Code Number

List all other secondary schools you have attended since 9th grade, including academic summer schools or enrichment programs hosted on a secondary school campus:

School Name & CEEB/ACT Code Location (City, State/Province, ZIP/Postal Code, Country) Dates Attended (mm/yyyy)

Please list any community program/organization that has provided free assistance with your application process:

If your education was or will be interrupted, please indicate so here and provide details in the Additional Information section:

Colleges & Universities List all college/university affiliated courses you have taken since 9th grade and mark all that apply: taught on college campus (CD); taught on high school campus, excluding AP/IB (HS); taught online (ON); college credit awarded (CR); transcript available (TR); degree candidate (DC).

College/University Name & CEEB/ACT Code Location (City, State/Province, ZIP/Postal Code, Country) Dates Attended (mm/yyyy)

Degree Earned

If you indicated that a transcript is available, please have an official copy sent to your colleges as soon as possible.

ACADEMICS

The self-reported information in this section is not intended to take the place of your official records. Please note the requirements of each institution to which you are applying and arrange for official transcripts and score reports to be sent from your secondary school and the appropriate testing agencies. Where "Best Scores" are requested, please report the highest individual scores you have earned so far, even if those scores are from different test dates.

Grades Class Rank Class Size Weighted? ○ Yes ○ No GPA Scale Weighted? ○ Yes ○ No

ACT Exam Dates: (past & future) mm/dd/yyyy m/s/yyyy m/s/yyyy

Best Scores: (no list) COMP mm/yyyy English mm/yyyy Math mm/yyyy

Reading mm/yyyy Science mm/yyyy Writing mm/yyyy

SAT Exam Dates: (past & future) mm/dd/yyyy m/s/yyyy m/s/yyyy

Best Scores: (no list) Critical Reading mm/dd/yyyy Math mm/yyyy Writing mm/dd/yyyy

Reading mm/yyyy Science mm/yyyy Writing mm/yyyy

TOEFL/ IELTS Exam Dates: (past & future) mm/dd/yyyy m/s/yyyy m/s/yyyy

Best Score: (no list) Test Score mm/yyyy

AP/IB/SAT Subjects Best Scores: (past & future) mm/dd/yyyy Type & Subject Score mm/yyyy

Type & Subject Score mm/yyyy

Type & Subject Score mm/yyyy

Current Courses Please list all courses you are taking this year and indicate level (AP, IB, advanced, honors, etc.) and credit value. Indicate quarter classes taken in the same semester on the appropriate semester line.

Full Year/First Semester/First Trimester Second Semester/Second Trimester Third Trimester

or additional first/second term courses if more space is needed

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**Honors** Briefly list any academic distinctions or honors you have received since the 9th grade or international equivalent (e.g., National Merit, Cum Laude Society).

<table>
<thead>
<tr>
<th>Grade level or post-graduate (PG)</th>
<th>Honor</th>
<th>Highest Level of Recognition</th>
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<tr>
<td>9 10 11 12 PG</td>
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**EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE**

**Extracurricular** Please list your principal extracurricular, volunteer, and work activities in their order of importance to you. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.

<table>
<thead>
<tr>
<th>Grade level or post-graduate (PG)</th>
<th>Approximate time spent</th>
<th>When did you participate in the activity?</th>
<th>Positions held, honors won, letters earned, or employer</th>
<th>If applicable, do you plan to participate in college?</th>
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<tr>
<td>9 10 11 12 PG</td>
<td>Hours per week</td>
<td>Weeks per year</td>
<td>School year</td>
<td>Summer/School Break</td>
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Please briefly elaborate on one of your extracurricular activities or work experiences in the space below.

Please write an essay of 250 – 500 words on a topic of your choice or on one of the options listed below, and attach it to your application before submission. Please indicate your topic by checking the appropriate box. This personal essay helps us become acquainted with you as a person and student, apart from courses, grades, test scores, and other objective data. It will also demonstrate your ability to organize your thoughts and express yourself. NOTE: Your Common Application essay should be the same for all colleges. Do not customize it in any way for individual colleges. Colleges that want customized essay responses will ask for them on a supplement form.

☐ 1. Evaluate a significant experience, achievement, risk you have taken, or ethical dilemma you have faced and its impact on you.
☐ 2. Discuss some issue of personal, local, national, or international concern and its importance to you.
☐ 3. Indicate a person who has had a significant influence on you, and describe that influence.
☐ 4. Describe a character in fiction, a historical figure, or a creative work (as in art, music, science, etc.) that has had an influence on you, and explain that influence.
☐ 5. A range of academic interests, personal perspectives, and life experiences adds much to the educational mix. Given your personal background, describe an experience that illustrates what you would bring to the diversity in a college community or an encounter that demonstrated the importance of diversity to you.
☐ 6. Topic of your choice.

Additional Information Please attach a separate sheet if you wish to provide details of circumstances or qualifications not reflected in the application.

Disciplinary History
☐ Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution.  ○ Yes ○ No
☐ Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime?  ○ Yes ○ No
[Note that you are not required to answer “yes” to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered “yes” to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

Note: Applicants are expected to immediately notify the institutions to which they are applying should there be any changes to the information requested in this application, including disciplinary history.

SIGNATURE

Application Fee Payment: If this college requires an application fee, how will you be paying it?
☐ Online Payment ☐ Will Mail Payment ☐ Online Fee Waiver Request ☐ Will Mail Fee Waiver Request

Required Signature
☐ I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institution to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have certified be false.
☐ I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable to that upon which the offer was based, as well as honorable dismissal from the school.
☐ I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: Students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature ____________________________ Date __________ mmm/dd/yyyy

Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.

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RESIDENCY INFORMATION

FIRST NAME ___________ LAST NAME ___________ CAMPUS ID ___________ TERM APPLYING ___________

Do you wish to be considered for in-state tuition status?  
☐ Yes  ☐ No (If yes, you must complete this section of the application.)

IF ANY OF THE CATEGORIES BELOW APPLY, PLEASE CHECK THE APPROPRIATE BOX, PROVIDE REQUESTED INFORMATION AND/OR DOCUMENT.

☐ I am a part-time (50%) or full-time regular employee of the University System of Maryland or, I am the spouse of, or am financially dependent upon a parent or legal guardian who is, a regular employee of the University System of Maryland.

Please indicate relationship:

☐ Please attach a letter of verification from the Human Resources Office of the campus at which you or your spouse or parent or legal guardian is employed.

☐ I am a full-time active member of the U.S. Armed Forces whose home of residency is Maryland or one who resides or is stationed in Maryland, or the spouse or a financially dependent child of such a person. Please attach a copy of your deed or lease (if applicable), or verification from the service that you have declared Maryland as your "home of residency" (if applicable); and the most recent assignment orders. Also, please indicate date of expected separation from the military.

☐ I am a veteran of the United States Armed Forces residing in Maryland. Please submit a copy of your DD214. If you have a discharge category other than honorable, please also submit a copy of your Certificate of Eligibility.

☐ I am the spouse or child of a veteran of the United States Armed Forces using educational benefits under the Post-9/11 GI Bill (38 U.S.C.§ 3311(b)(8) or 3319) and living in Maryland. Please submit a copy of the veteran’s DD214 and a copy of your Certificate of Eligibility.

☐ I am eligible for in-state status considerations under the Maryland National Guard Nonresident Tuition Exemption. I am eligible because (1) I joined or subsequently served to provide a critical military occupational skill or (2) I am a member of the Air Force critical specialty code. I understand that I must provide documentation from my company commander for consideration.

APPLICANTS SEEKING IN-STATE STATUS AS A MARYLAND RESIDENT MUST COMPLETE THE FOLLOWING QUESTIONS. Failure to complete all of the required items may result in a non-Maryland resident classification and out-of-state charges being applied. Residency classification information is evaluated in accordance with the University System of Maryland policy on residency. The applicant may be contacted for clarification of an item, or for additional information as necessary.

PLEASE CHECK ONE:

☐ I am financially independent. I have earned taxable income and I have not been claimed as a dependent on another person’s most recent income tax returns.

☐ I am financially dependent on another person who has claimed me as a dependent on his/her most recent income tax returns, or I am a ward of the State of Maryland. If a ward of the State, please submit documentation and go to item 10.

Name of person upon whom dependent and relationship to applicant: ________________________________________________

a. How long have you been dependent upon this person? __________________________________

b. Is the person a resident of Maryland?  ☐ Yes  ☐ No

c. Address of this person: ___________________________________________________________

   d. Has this person filed a Maryland state income tax return for the most recent year on all earned taxable income?  ☐ Yes  ☐ No

   i. If a Maryland tax return has not been filed within the last 12 months, state reason(s): __________________________

   e. Signature of this person: ______________________________________________________

The Student Applicant is responsible for completing items 1 - 10.

1. Permanent address: ______________________________________________________________

Length of time at permanent address _______ years _______ months

If less than 12 months, provide previous address: __________________________________________

Length of time at previous address _______ years _______ months

2. Did you move to Maryland primarily to attend an educational institution?  ☐ Yes  ☐ No

3. Are all, or substantially all of your possessions in Maryland?  ☐ Yes  ☐ No

4. Do you possess a valid driver’s license?

a. If yes, initial date of issue ____________________________

b. In what state? ______________________________________

c. Most recent date of issue ____________________________

d. In what state? ______________________________________

5. Do you own any motor vehicles?

a. If yes, initial date of registration ______________________

b. In what state? ______________________________________

b. Most recent date of registration ______________________

c. In what state? ______________________________________

6. Are you registered to vote?

a. If yes, in what state? ____________________________

b. Date of registration: ____________________________

c. Were you previously registered to vote in another state?  ☐ Yes  ☐ No

7. Have you filed a Maryland state income tax return for the most recent year?  ☐ Yes  ☐ No

a. If a Maryland tax return has not been filed within the last 12 months, state reason(s):

b. ____________________________________________________________

8. Is Maryland state income tax currently being withheld from your pay? If no, provide explanation.  ☐ Yes  ☐ No

9. Do you receive any public assistance from a state or local agency other than one in Maryland?

a. If yes, indicate type and issuing state: _____________________________________________________

I certify that the information provided is complete and correct. I understand that the University reserves the right to request additional information if necessary. In the event the University discovers that false or misleading information has been provided, the Student Applicant may be billed by the University retroactively to recover the difference between in-state and out-of-state tuition or the current and subsequent semesters.

Signature of Applicant __________________________ Date ____________