

# Application for Post Baccalaureate Programs



Official college transcript(s) sent directly from all previous Universities and two letters of recommendation must also be provided.

I am applying for  September 20 \_\_\_\_  January 20 \_\_\_\_ PROGRAM:  Education  BSW  other

I will attend  Full time  Part time

Gender *optional*

1. Print legal name in full \_\_\_\_\_  Female  
LAST/FIRST/MIDDLE

Preferred first name \_\_\_\_\_  Male

2. Social Security/Social Insurance Number \_\_\_\_\_

3. Name used on previous records (e.g. maiden) \_\_\_\_\_

4. Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Citizen of \_\_\_\_\_  
MONTH / DAY / YEAR

5. Present Mailing Address \_\_\_\_\_

STREET / CITY / STATE OR PROVINCE / ZIP-POSTAL CODE / COUNTRY

6. Telephone \_\_\_\_/\_\_\_\_ Business/School Telephone \_\_\_\_/\_\_\_\_ Fax \_\_\_\_/\_\_\_\_  
AREA CODE / TELEPHONE AREA CODE / TELEPHONE AREA CODE / TELEPHONE

7. E-mail \_\_\_\_\_

5. Permanent Mailing Address \_\_\_\_\_  
STREET / CITY / STATE OR PROVINCE / ZIP-POSTAL CODE / COUNTRY

9. Housing Plans  Residence Hall  Off-Campus

10. A. Degree Earned  3 year  4 year From \_\_\_\_\_ Major in \_\_\_\_\_

B. Other University(ies) attended \_\_\_\_\_

11. Is English your primary language? *optional*  Yes  No

12. Emergency Information: Please provide information of parent, spouse, or other person to be notified in case of emergency

NAME / RELATIONSHIP / TELEPHONE

Please indicate if you are Hispanic/Latino:  Yes  No

Please select one or more of the following racial categories to describe yourself:

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

Have you ever been found responsible for a disciplinary violation at an educational institution you have attended from 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct that resulted in your suspension, removal, dismissal, or expulsion from the institution?  YES  NO

Have you ever been convicted of a misdemeanor, felony, or other crime, or adjudicated of committing a juvenile crime?  YES  NO

If you answered yes to either or both questions, please attach a separate sheet that gives the approximate date of each incident and explains the circumstances.

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How did you first learn about this campus/program?

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If interested in EDUCATION:

- seeking certification to teach     Elementary (K-8)     Physical Education (K-12)  
 Secondary (7-12) - subject area (if Secondary)

Secondary Subject Areas:

- |                                  |   |
|----------------------------------|---|
| <input type="checkbox"/> Science | <input type="checkbox"/> Mathematics    |
| <input type="checkbox"/> English | <input type="checkbox"/> Social Studies |
| <input type="checkbox"/> French  |   |

List experience you have had teaching or otherwise working with children. (50 hours required before starting program) \_\_\_\_\_

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FOR EDUCATION PROSPECTS: Achieving a passing score on the PRAXIS I test of basic skills and taking the PRAXIS II in the appropriate content area are required, along with other program requirements such as GPA, in order to qualify for student teaching. Your signature on this application acknowledges your awareness of these program requirements.

I hereby grant to the University of Maine at Presque Isle and its nominees, designees, successors and assigns, or others for whom and with whom they are acting or may act, full authorization and absolute right and permission to assign, convey, reproduce, copyright use and or publish my photograph, likeness, voice and/or name in any photograph in which I may be included in whole, in part, or in composite, or in which the character or form is distorted, in conjunction with my own or any other picture, product, person, name or reproduction, in color or otherwise, made through any media at any time for art, advertising, commerce, business, or trade, or any other lawful purpose whatsoever. As used in this release, "photograph" means any photographic reproduction – still or moving – on film, videotape, or other medium (whether it be known or yet to be discovered or developed) in which I may be identifiable or otherwise appear to be depicted.

I hereby waive any and all rights that I may have to inspect or approve any finished product or any advertising copy which may be used in connection herewith or any use to which it may be applied.

I hereby release, discharge and agree to hold harmless the University of Maine at Presque Isle and its nominees, designees, successors and assigns, or others for whom and with whom they are acting or may act, from any liability of any nature or description by virtue of any use whatsoever, whether intentional or otherwise or from any change that may occur or be produced in the taking of said photograph or in any processing tending towards the completion of any finished product, unless it can be shown that said use or change is solely for the purpose or subjecting me to conspicuous ridicule, scandal, reproach, scorn, or indignity.

I am age 18 or older.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Official college transcript(s) sent directly from all previous Universities and two letters of recommendation must also be provided. Please return all information to:*

Office of Admissions • University of Maine at Presque Isle  
181 Main Street • Presque Isle ME 04769-2888 USA  
FAX 207.768.9777  
WWW.UMPI.EDU

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