

Financial Aid and Admission Statements

(This Section **Must** Be Completed and Signed) – Please Read Carefully–

AUTHORIZATION: The undersigned does hereby certify to the best of his/her knowledge; the information given in this application is correct and complete. Further, it is agreed the University has permission to verify any or all information given herein. It is also agreed the University shall be supplied copies of U.S. and State Income Tax Reports upon request. Any significant change in financial status will be reported to the University.

STATEMENT OF EDUCATIONAL PURPOSE / REGISTRATION COMPLIANCE

To the applicant for Federal Student Financial Assistance:

Section 484 of the Higher Education Act (20 U.S.C. 1091) requires that each recipient of a grant, loan or loan guarantee under the Pell Grant, Supplemental Educational Opportunity Grant, National Direct Student Loan, Guaranteed/Federal Insured Student Loan or Auxiliary Loan programs file a statement of education purpose stating that money attributable to such a grant, loan or loan guarantee will be used solely for expenses related to attendance or continued attendance at an institution of higher education. The amount of compensation received from employment under the College Work-Study Program is based on a student's need for such funds to attend an institution of higher education; thus, earnings from that program must be used solely for expenses related to attendance at such an institution. A student participating in the College Work-Study Program shall file a statement to that effect.

Furthermore it is a federal law (Public Law 97-252; Section 1113 of the Fiscal Year 1983 Defense Department Authorization ACT, 48FR15578-84) that a student is ineligible for student financial assistance provided through programs established under Title IV of the Higher Educational Act if the student is required to have registered with Selective Service and fails to do so. **CHECK THE STATEMENTS BELOW (Items 1-8), SIGN AND DATE**

- I CERTIFY that the information provided to the University of Mobile on my application(s) for financial aid is correct and complete.
- I CERTIFY that the University of Mobile has permission to verify any information used in determining my eligibility for financial aid.
- I CERTIFY that any significant change in financial status will be reported in writing to the University of Mobile Office of Financial Aid.
- I CERTIFY that I am not required to be registered with Selective Service, because (check one reason):
 I am female I have not reached my 18th birthday I was born before 1960
 I am in the armed services on active duty (NOTE: *Members of the reserves and National Guard are not considered on active duty.*)
 I am a permanent resident of the Trust Territory of the Pacific Islands or Northern Marine Islands.
- I CERTIFY that I am registered with Selective Service.
- I CERTIFY that I will use any funds I receive under the Pell Grant, Supplemental Educational Opportunity Grant, College Work-Study Program, Guaranteed Student Loan, Alternative Loan, PLUS Loan, Alabama Student Program, Alabama Student Assistance Program, Student Incentive Grant Programs solely for expenses connected with attendance at the University of Mobile.
- I CERTIFY that I am not in default on any loan made under the National Direct/Defense Student Loan, Guaranteed Student Loan, Nursing Loan, Alternative Loan, Parent Loan Program (Title IV, HEA loan) for attendance at any institution.
- I CERTIFY that I do not owe a refund on a grant received under the Pell Grant, Supplemental Opportunity Grant, Alabama Student Grant, Alabama Student Assistance Grant or State Student Incentive Program (Title IV, HEA grant) for attendance at any institution.

PLEASE REFER TO THE CATALOG FOR ALL ADMISSION AND FINANCIAL AID REQUIREMENTS:

By signing below:

- I am fully aware that the University of Mobile expects a high standard of academic performance and personal conduct from each student. I understand and agree with these principles and, if accepted for admission, I promise to abide by all rules and regulations of the University of Mobile.
- I understand that if any information on this form is found to be inaccurate or incomplete, it will be sufficient cause for my rejection or dismissal.
- If I choose to enroll, I understand it is my responsibility to read all University publications, including but not limited to the University of Mobile catalog and Student Handbook.
- I agree to conduct myself in accordance with the high standards of the University of Mobile and the established residence hall policies as set forth in the University of Mobile catalog, Student Handbook and other publications.

Student Signature: _____ Date: _____

NOTE: A Non-Refundable Application Fee of \$50 **MUST** accompany this application at time of submittal:

Check attached Please make check payable to "University of Mobile"

Bill Credit Card: VISA/MC/AMEX # _____ Exp. Date _____

Name on Credit Card: _____ Authorized Signature: _____



UNIVERSITY OF MOBILE

Application for Admission, Financial Aid and Student Housing

5735 College Parkway • Mobile, Alabama 36613-2842 • (251) 442-2273 • 1-800-WIN-RAMS (1-800-946-7267)

adminfo@mail.umobile.edu

Personal Information

Name _____ Mr. Mrs. Miss Ms.

Preferred Name/Nickname _____ Former Last Name (If any) _____

Social Security Number _____ Applying for Entry in Year _____ Semester: Fall Spring Summer

County _____ Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Address _____ City _____ State _____ Zip/Postal Code _____

I Plan to enter (Check One): Traditional Undergraduate Program Center for Adult Programs

I Plan to enter as a (Check One): Freshman Transfer Transient

Non-degree Seeking Audit

REQUIRED ADMISSIONS DOCUMENTATION:

- Proof of Measles/Rubella Immunization** (Required of all students born after January 1, 1957) Copy Attached To Be Mailed
- Proof of TB (Tuberculosis) Skin Test** (Required for residential students living on campus) Copy Attached To Be mailed
- Final High School Transcripts and All College Transcripts** (Official Transcripts Required) Copy Attached To Be Mailed
- Official ACT/SAT Score** (Scores must be received directly from H.S. or ACT/SAT) Copy Attached To Be Mailed

Please List Your Proposed Major/Academic Interest (see list of academic areas below): _____

AREAS OF STUDY IN THE TRADITIONAL UNDERGRADUATE PROGRAM (Majors are listed in BOLD.)

Accounting	Communication-Print/Broadcasting Journalism	Pre-Dentistry-Biology
Accounting-Corporate/Non-Profit	Computer Information Systems	Pre-Medicine-Biology
Accounting-Public Accounting (4-Yr)	Computer Information Systems-Information Security	Pre-Pharmacy-Biology
Accounting-Integrated Program (5 Yr MBA)	Education-Early Childhood	Pre-Physical Therapy - HPES
Art	Education-Elementary Education	Pre-Veterinary Medicine-Biology
Athletic Training	Education-High School Certification	Political Science
Biology	English	Political Science-Pre-Law
Business Administration	Environmental Management	Psychology
Business Administration-Finance	General Studies	Social Science
Business Administration-Global Business	History	Sociology
Business Administration-Management	Human Performance & Exercise Science	Theatre
Business Administration-Marketing	Humanities	Theology
Church Music	Marine Science	Theology-Missions
Communication	Mathematics	Theology-Pastoral Ministry
Communication-Advertising/Public Relations	Music	Theology-Youth Ministry
Communication-Business Communication	Musical Theatre	Vocal Performance
Communication-Health Care Communication	Pre-Engineering-Mathematics	Worship Leadership

MAJORS AVAILABLE FOR THE CENTER FOR ADULT PROGRAMS

- Bachelor of Business Administration
- Biblical Studies
- Early Childhood or Elementary Education
- Leadership and Cultural Studies
- Bachelor of Science in Nursing

Educational Information

Last High School Attended _____ Graduation Date _____ GPA _____
 High School City and State _____ Are You a U.S. Citizen? Yes No
 ACT/SAT Score _____ GED Score (If Applicable) _____
 High School Clubs/Organizations You Participated In _____

List **All** Colleges You Previously Attended. Please be sure to include dual enrollment information. **Do Not** Use Abbreviations.
 Failure to Give Full and Complete Information May Result in Loss of Credit or Dismissal From the University of Mobile.
 (Attach separate sheet if necessary)

School/State	Hours Earned	Dates Attended	Degree Received

Have You Ever Been Placed on Probation, Suspended or Dismissed From Any School? Yes No

If Yes, Please Explain: _____

Student Housing Information – This Section **MUST** Be Completed By **ALL** Applicants

All undergraduate, unmarried students, with the exception of those who live with a parent or guardian, or are over 21 years of age, or have completed 90 hours by the beginning of the Fall academic period are required to maintain residence on the University of Mobile campus.

Please check the box that describes your planned housing status:

- ON CAMPUS RESIDENT - I am twenty years old or younger **and** have a single marital status.
- LIVING WITH PARENTS OR GUARDIAN – I am twenty years old or younger, have a single marital status, live within driving distance and will be residing with my parents or legal guardian.
- COMMUTER – I am married/divorced/widowed **or** am 21 or older **or** have earned at least 90 hours of college credit and have chosen to commute.

Applicant Family Information (You may skip this section if you are not a first-time freshman or are over the age of 24.)

Father's Name _____ Mother's Name _____
 Address _____ Address _____
 City _____ State _____ Zip _____ City _____ State _____ Zip _____
 Employer _____ Employer _____
 Phone _____ Email _____ Phone _____ Email _____

Optional Background Information

Note: The following requested information is optional. It is used for institutional research and federal reports. It will in no way affect your admission to the University of Mobile. The University of Mobile is an equal opportunity educational institution and does not discriminate on the basis of race, sex, age or disability.

Date of Birth _____ Marital Status, Please Circle One: Single Married Divorced Widowed Separated

Circle One: Male Female

Citizenship: _____ United States _____ Other (Please Specify) _____

Ethnic Background: _____ American Indian or Alaskan Native _____ Asian American, Pacific Islander
 _____ African American, Black _____ Hispanic American
 _____ European American, White _____ Other (Please Specify) _____

Denominational Preference _____

Name/Address of Church You Attend _____

Tell us how you learned about the University of Mobile. If you were referred by a UM student, coach, alumnus/alumna or faculty member, or if you first learned about UM through radio/TV/newspaper advertising or a special or athletic event, please let us know by listing them below. _____