Instructions for completing:
1. Please print all information requested on the application.
2. Please forward an official copy of your high school transcript, and transcripts for all colleges previously attended.
3. If you are a GED recipient, please forward an official copy of your GED certificate and GED scores.
4. Forward official results of the ACT or SAT to Potomac State College of West Virginia University. Potomac State's ACT Code is 4529; SAT Code is 5539.
5. An immunization form will be sent to you once you are admitted to Potomac State. Be sure to complete this form and send it to us before you enroll.
6. If you are a high school senior, please request that a copy of your final official transcript be forwarded to Potomac State College of West Virginia University after graduation from high school.

No application fee required.

### Academic Majors

**Business and Economics**
- Business Administration
- Economics
- Hospitality and Tourism Management

**Business Technology**
- Business Technology

**Criminal Justice Studies**
- Criminal Justice Studies

**Education**
- Early Childhood Education
- Elementary Education
- Physical Education
  - Athletic Coaching Emphasis
  - Physical Ed. Teacher Emph.
  - Sport Management Emph.
- Secondary Education

**Engineering**
- Civil
- Electrical
- Mechanical

**Forestry**
- Parks and Recreation
- Resource Management
- Wildlife Resources
- Wood Industries

**Information Technology**
- Computer Information Systems
- Office Systems Technology

**Journalism**
- Journalism

- Associate of Arts (transfer degree)
- Associate of Applied Science (career/technical degree)

**Four Year/Bachelor Degrees**
- Business Management (BAS)
- Criminal Justice (BAS)
- Regents Bachelor of Arts (RBA)
1. Applicant Name: ___________________________  
2. Social Security Number: ___________ – _______ – ________
   (For internal use only. Will be kept confidential.)
3. Please print all maiden or other names you have used so we can match your academic records.
4. Have you ever attended: Potomac State College?  
   ☐ Yes  ☐ No  
   ☐ If Yes, for which semester/year? ____________________________.
5. Mailing Address: ___________________________  
6. Cell phone: (_____) ____________
7. County: ___________________________  
8. Permanent (if different):
   (Street) ___________________________  
   (City) ___________________________  
   (State) ___________________________  
   (Zip Code) ___________________________
9. Home phone: (_____) ____________
10. County: ___________________________
11. Name of person to contact in case of missing person/emergency (this can be your parent or guardian):
   (Last) ___________________________  
   (First) ___________________________  
   (Middle) ___________________________  
   (Relationship) ___________________________
12. Emergency Address: ___________________________  
   Telephone: (_____) ____________
   (Street) ___________________________  
   (City) ___________________________  
   (State) ___________________________  
   (Zip Code) ___________________________
13. Please indicate semester/year for which your are applying: __________ Year  
   ☐ Full-time  ☐ Part-time  
   ☐ Fall (August-December)  ☐ Spring (January-May)  ☐ Summer (May-August)
14. Please indicate Admission Type:  
   ☐ Freshman  ☐ Transfer  ☐ High School Student  ☐ Second Degree  
   ☐ Visiting Student  ☐ Nondegree  ☐ Readmit
15. Intended Major: ___________________________
   (see major table on preceding page)
16. Gender: ☐ Male  ☐ Female  
17. Date of Birth: ______/_____/______ (E.g., 1/30/1983)  
18. Citizen Status:  
   ☐ U.S. Citizen  ☐ Permanent Resident with Alien Card (enclose copy of both sides of card)  
   ☐ Refugee  ☐ *Non-Immigrant/Other Visa Type (specify): ____________________________________________
19. *Non-immigrants please indicate your nation of citizenship: ___________________________  
   Nation of birth: ___________________________
20. Ethnic Background (optional):  
   Do you consider yourself to be Hispanic/Latino? ☐ Yes  ☐ No  
   In addition, select one or more of the racial categories to describe yourself:  
   ☐ American Indian or Alaskan Native  ☐ White  
   ☐ Asian  ☐ Black or African American  
   ☐ Hawaiian/Pacific Islander
21. Check any intercollegiate athletics teams in which you are interested in participating:  
   ☐ Men’s Baseball  ☐ Men’s and Women’s Lacrosse  ☐ Women’s Softball  
   ☐ Men’s and Women’s Basketball  ☐ Men’s and Women’s Soccer  ☐ Women’s Volleyball  
   ☐ Men’s and Women’s Cross Country
23. Are you a resident of the state of West Virginia?  ❑ Yes  ❑ No
   If YES, when did you begin living continuously in West Virginia?  ____/____/_____
   (month/day/year)
   If YES, where? ___________________________________________________________
   (if different than above)

24. Last year, did anyone claim you as a dependent for income tax purposes?  ❑ Yes  ❑ No
   If YES, who? Name _______________________________________________________
   Relationship to You ______________________________________________________
   Street Address __________________________________________________________
   City and State ___________________________________________________________
   Zip Code ______________________________________________________________

25. Are you a veteran or currently serving in the military service?  ❑ Yes  ❑ No
   Are you a dependent of one?  ❑ Yes  ❑ No

26. High School Attended: ___________________________________________________

27. Graduation Date:  ____/_____     GED Date:  ____/_____

28. When did you take the ACT/SAT?  When do you plan to take the ACT/SAT?
   ACT  ____/_____     SAT  ____/_____     ACT  ____/_____     SAT  ____/_____
   (month/year) (month/year) (month/year) (month/year)

29. College Education: Please list all formal educational experiences (if any) since you graduated from high school. You must request that each school send PSC an official transcript. Attach extra sheets if needed.
   Name of School _______________________________________________________
   Location ______________________________________________________________
   From  ____/____/____  to  ____/____/____
   City/State _____________________________________________________________
   Dates From  ____/____/____  to  ____/____/____
   Degree Earned __________________________________________________________
   Name of School _______________________________________________________
   Location ______________________________________________________________
   From  ____/____/____  to  ____/____/____
   City/State _____________________________________________________________
   Dates From  ____/____/____  to  ____/____/____
   Degree Earned __________________________________________________________

30. Are you currently enrolled in the last college listed above?  ❑ Yes  ❑ No

31. Are you academically eligible to return to your most recently attended college/university?  ❑ Yes  ❑ No

32. If transferring credit from another college or university, how many credit hours have you completed?   _______

33. Highest level of education your father/mother completed?  ❑ Middle School/Junior High  ❑ High School
   ❑ Some College  ❑ College Degree

I affirm that the information I have provided on this application form and all other admissions application materials is complete, accurate, and true to the best of my knowledge. Omitting or providing false information can lead to nonacceptance, the nullification of PSC credit, and/or dismissal. In addition, I understand that I am responsible for payments of all fees. In consideration of my admission and enrollment, I, the undersigned, so hereby agree to assume and pay any and all costs and charges including interest, collection and reasonable attorney’s fees for delinquent accounts.

Student Signature _________________________________ Date ___________________