

JOIN THE

Revolution

Undergraduate Application



FRANCIS MARION UNIVERSITY



UNDERGRADUATE APPLICATION FOR ADMISSION

Application Instructions

Thank you for applying to Francis Marion University. Please complete this form and submit the following:

- The completed Undergraduate Application for Admission
- Official high school and college transcript(s) from all institutions attended. **If currently enrolled, please include current class schedule.** Transcripts must be sent to FMU's Admissions Office directly from your high school or college.
- Official SAT or ACT scores
- A \$30 non-refundable application fee made payable to FMU

You will be hearing from us soon.

Listed below are undergraduate majors and programs offered at Francis Marion University. Please designate your chosen major and/or program on the application form. For more information about a major or program, refer to the FMU Catalog.

MAJORS

Accounting
 Art Education
 Biology – General
 Biology – Environmental Science Option
 Biology – Medical Technology Option
 Business Administration (General)
 Business Economics
 Chemistry – General
 Chemistry – Environmental Science Option
 Computer Science
 Early Childhood Education
 Economics
 Elementary Education
 English – Professional Writing Option
 English – Liberal Arts Track
 English – Teacher Certification
 Finance
 History – General
 History – Teacher Certification
 International Studies
 Management
 Management Information Systems
 Marketing
 Mass Communication – Convergence
 Mass Communication – Broadcast Journalism Specialty
 Mass Communication – Print Journalism Specialty

Mass Communication – Public Relations Specialty
 Mathematics – Mathematical Sciences Option
 Mathematics – Teacher Certification
 Middle Level Education
 Modern Languages – French Track
 Modern Languages – German Track
 Modern Languages – Spanish Track
 Nursing – RN Completion Program
 Nursing – BSN Program
 Physics – Computational Physics Concentration
 Physics – Environmental Science Option
 Physics – Health Physics Concentration
 Political Science – General
 Political Science – Teacher Certification
 Political Science – Criminal Justice Concentration
 Psychology
 Sociology – Criminal Justice Concentration
 Sociology – General
 Sociology – Teacher Certification
 Theatre Arts – Design Specialty
 Theatre Arts – Performance Specialty
 Visual Arts – Ceramics Specialty
 Visual Arts – Graphic Design Specialty
 Visual Arts – Painting Specialty
 Visual Arts – Photography Specialty

PROGRAMS

Cooperative Degree Programs
 Degrees awarded by Francis Marion University
 Civil Engineering Technology
 (with South Carolina Technical Colleges)
 Electronic Engineering Technology
 (with South Carolina Technical Colleges)
 Medical Technology
 (with McLeod Regional Medical Center)
 Degrees awarded by another institution
 Aquaculture, Fisheries &
 Wildlife Biology (with Clemson)
 Clinical Laboratory Science (with MUSC)
 Engineering – Dual Degree (with Clemson)
 Forest Management (with Clemson)
 Military Science: ROTC (with USC)

Pre-Professional Programs
 Pre-dental
 Pre-engineering
 Pre-law
 Pre-medical
 Pre-pharmacy
 Pre-veterinary

Enrollment Status: (check only one):

- First time freshman seeking a bachelor's degree
- Transfer student seeking a bachelor's degree
- Readmit
- Seeking second bachelor's degree
- Transient, one term
- Concurrent Student
- Non-degree seeking

Term applied for:

- Spring 200__
- Late Spring 200__
- Summer I 200__
- Summer II 200__
- Fall 200__

Ethnic Background: (check one)

Responding to this inquiry is voluntary and will not be used in a discriminatory fashion.

- 1 = White, not of Hispanic Origin
- 2 = American Indian or Alaskan Native
- 3 = Black, not of Hispanic Origin
- 4 = Asian or Pacific Islander
- 5 = Hispanic

Major and/or Program (see list on opposing page): _____

Personal Information

Full Name _____
First Middle Last Any other last name on record

Preferred Name _____

Social Security Number _____ Female Male Date of Birth _____
Month/Day/Year

Country of Citizenship _____ Do you plan to live on campus? Yes No

Is S.C. your permanent state of residence? Yes No If yes, you must complete enclosed S.C. residency certification form.

If you are not a US citizen, are you a permanent resident? Yes No If yes, attach a copy of your green card.

Permanent Address _____
Number and Street

_____ Telephone () _____
City State Zip Code County

Mailing Address _____
(if different from permanent address) Number and Street

_____ Telephone () _____
City State Zip Code County

E-mail Address _____ Mobile Phone () _____
(These will be used for official emergency communication purposes while a student at FMU.)

Family Information (Communication for parent/guardian should be mailed to):

Name _____ Relationship _____

Address _____

Home Phone () _____ Work Phone () _____

Emergency contact information, if different from above:

Name _____ Relationship _____

Address _____

Home Phone () _____ Work Phone () _____

Educational Information

Name of High School _____ City/State/Zip Code _____ Dates of attendance (mo/yr) _____ Year of Graduation _____

List all colleges, universities, and other institutions of higher learning you have attended regardless of program, academic performance, or length of enrollment:

Name of School _____ City/State/Zip Code _____ Dates of attendance (mo/yr) _____ Degree Earned _____

Additional Questions: This section **must** be completed.

Have you ever been convicted of a criminal offense other than a minor traffic violation?

_____ Yes _____ No

Are there criminal charges pending against you at this time?

_____ Yes _____ No

Have you entered a plea of guilty, a plea of no contest, a plea of nolo contendere, or an Alford plea to a criminal charge?

_____ Yes _____ No

Have you otherwise accepted responsibility for the commission of a crime?

_____ Yes _____ No

Have you ever been dismissed, suspended, or placed on probation by any school for reasons other than academic performance?

_____ Yes _____ No

If you answered yes to any of the five questions above, please include a written explanation of the circumstances on a separate sheet and have the appropriate court or school provide documentation of the crime or offense.

Please send documentation to: Associate Provost for Enrollment Management, Francis Marion University,
PO Box 100547, Florence, SC 29501-0547

Please read and sign:

The information provided in this application is complete and accurate to the best of my knowledge. I agree to accept the regulations set forth in the FMU catalog regarding academic standing, attendance, personal conduct, and other matters. I realize that withholding information from or providing false information to the university could result in my application being rejected, my admission being rescinded, or my dismissal from Francis Marion University.

Applicant's Signature

Date

Mail application to:

Francis Marion University, Admissions Office
P.O. Box 100547, Florence, SC 29501-0547

Residency Form _____

SC _____ NR _____

Francis Marion University offers equal opportunity in its employment, admissions, and educational activities in compliance with federally-mandated civil rights legislation and corresponding state of South Carolina legislation.

DEPENDENT PERSONS COMPLETE ITEMS 9-18 and sign at the bottom of this form. Dependent persons are persons who will not provide more than half of their own support the 12 months prior to their enrollment or re-enrollment, and who will be claimed as dependents or exemptions on someone else's federal income tax return the year of their enrollment or re-enrollment. Dependent persons are also persons who are under the legal custody of a parent or legal guardian.

9. Name of person who will provide more than half of your support the 12 months prior to your enrollment or re-enrollment and will claim you as a dependent or exemption on his or her federal income tax return the year of your enrollment or re-enrollment, or name of person who has legal custody of you:

Name _____ Relationship _____

If legal custody granted, give date legal custody was granted _____

10. Citizenship of person in Item #9 (check one only)

a. U.S. citizen b. Not U.S. citizen, but permanent resident of U.S. **Date permanent resident status granted** _____

c. Other, give visa type _____

Note: If person is not a U.S. citizen, attach photocopy of official document verifying the person's immigrant status.

11. Addresses where person named in Item #9 has physically resided for the past two years (including current address):

_____ street _____ city _____ state _____ zip _____ from (mo/yr) _____ to (mo/yr) _____

_____ street _____ city _____ state _____ zip _____ from (mo/yr) _____ to (mo/yr) _____

12. Employment for the past two years of person named in Item #9: **(If unemployed the past two years, list last employer.)**

_____ employer _____ city/state/zip _____ full-time or part-time _____ from (mo/yr) _____ to (mo/yr) _____

_____ employer _____ city/state/zip _____ full-time or part-time _____ from (mo/yr) _____ to (mo/yr) _____

13. Does the person in Item #9 have a driver's license? yes no If yes, from what state? _____ Driver's license number _____

Current date of issue of driver's license _____ month _____ day _____ year When did this person first obtain this license? _____ month _____ day _____ year

14. Does the person in Item #9 have a motor vehicle registered in his or her name? yes no If yes, in what state is the vehicle registered? _____

Current date of issue of vehicle registration certificate _____ month _____ day _____ year Date vehicle purchased _____ month _____ day _____ year

Date the person first registered the vehicle in South Carolina _____ month _____ day _____ year

15. Is the person in Item #9 a registered voter? yes no If yes, in what state is the person a registered voter? _____

Current date of voter registration certificate _____ month _____ day _____ year

16. Did the person in Item #9 file a South Carolina income tax return for the last tax year? yes no

If so, under what status did he or she file the return? full-year resident part-year resident nonresident

17. Did or will the person in Item #9 claim you as a dependent or exemption (filing jointly) on his or her last year's federal income tax return? yes no

18. Will the person in Item #9 claim you as a dependent or exemption on his or her federal income tax return the year you expect to begin classes? yes no

If not, you also need to complete item 1-8 on the front of this form.

19. I certify that the information I have provided is true and accurate. I understand that additional information may be requested if further clarification is needed.

Applicant's Signature _____ Date _____

Daytime Phone Number (_____) _____ area code _____ number Email Address _____

Mail Residency Certification Form to:

Francis Marion University
Office of Admissions
Post Office Box 100547
Florence, South Carolina 29501-0547

OR

Fax both sides to:
843-661-4635
(Do not mail if you fax the form.)

Francis Marion University offers equal opportunity in its employment, admissions, and educational activities in compliance with federally-mandated civil rights legislation and corresponding state of South Carolina legislation.