

UNDERGRADUATE AND GRADUATE ADMISSION

Congratulations on taking the next step toward earning your degree.

NEXT STEPS:

- Carefully read and completely fill out each section of this form. Questions regarding this form may be directed to the Office of Admissions toll-free at 888-647-2388.
- 2. Request that official transcripts be sent directly to Excelsior College, Office of Registration and Records, 7 Columbia Circle, Albany, NY 12203-5159. Official transcripts are those that a college, testing agency, or education office submits directly to Excelsior College. The issuance date of the transcript must be within three weeks or less.
- 3. Complete the FAFSA (Free Application for Federal Student Aid) to be considered for financial assistance such as federal grants and loans, institutional scholarships, and private loans. For more information, go to www.excelsior.edu/FinancialAid. Students registered for examinations are not eligible for federal student aid but may qualify for institutional scholarships.

GRADUATE DEGREE CANDIDATES

Turn to page 10 for admission requirements and special instructions.

INTERNATIONAL CANDIDATES

Visit international.excelsior.edu for admission requirements and special instructions.

UNDERGRADUATE AND

FOR OFFICE USE ONLY GRADUATE APPLICATION FOR ADMISSION Special Population Please print or type all information requested and review responses for accuracy. Social Security Number (USA) (Federal Aid applicants are required to provide their SSN) Third Party Current legal name Last (Family) name First (Given) name Middle initial Birth/maiden name (If different from current last name) Nickname/Phonetic Name (By which you may have been identified in relevant academic records) Permanent address (required) Mailing address Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable) Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable) City State City State Zip code Country (If not USA) Zip code Country (If not USA) Please provide the state or territory where you will be physically located while taking your online course(s) Contact information (Indicate (M)orning (A)fternoon or (E)vening) Mobile phone (m)/(a)/(e) Preferred Home phone Other phone Email address Communication Preference: Phone or Fmail I authorize Excelsior College and its agents to contact me at my current and any future mobile devices and email address via text messages, personal calls, email for purpose related to my education. SMS admissions: Opt in Opt out **SMS advising:** Opt in Opt out **Electronic Communications Consent Academic Evaluations** Whenever the College evaluates the credits you have earned, you will receive your My Academic Plan, the document that explains how credits earned will apply toward your academic program and which credits you still need to earn. We will notify you via email each time your academic plan is updated, and you can view this document at the Excelsior College website conveniently and without delay. Please make certain that you complete your email address above. If you do not wish to receive electronic delivery of your academic evaluations, check this box to receive these documents in printed form. **Excelsior College Updates** No, I do not wish to receive Excelsior College updates via email broadcasts. If you answer yes to subscribe to this service, be sure to add no-reply@excelsior.edu, TechSupport@excelsior.edu, or the excelsior.edu mail server to your email software's address book or allowed list. If you are using a spam filter or blocker that requires confirmation from the sender or is set to reject email from certain domains, this procedure is necessary in order to ensure that you receive Excelsior College correspondence. Please select your sex Male Date of birth (mm/dd/yyyy format) Female If you would like the opportunity, please provide your pronoun.

It has be	en longer than	12 months since	I graduated	d from high scl	nool or earned my (GED or	uivalency Test in the High School Equivaler D or High School Equiv			
	etina hiah sc	hool have you	taken at l	east one com	rse in any college	unive	ersity or technical s	chool? Tyes TNo		
Since completing high school, have you taken at least one course in any college, university, or technical school? \(\subseteq \text{No} \) No If yes, list all previously earned degree(s):										
, , ,	TYPE OF DEGI			GREE EARNED	INSTITUTI	ON GR	ANTING DEGREE	CHECK IF YOU ARE SENDING A TRANSCRIPT		
								See page 8 for information regarding transcripts.		
Are you Hisp	anic/Latino/L	.atina? 🔲 His	panic or La	tino No	t Hispanic or Latino)				
			-	_	o describe yoursel n American		awaiian or Other Pacifi	c Islander		
-		igible noncitizer onal U.S. Du		U.S. Perm	anent Resident	U.S.	Refugee or Asylee [International/Non-U.S. Citizen		
Is English yo	ur native lang	uage? 🗌 Yes	□ No							
If English is n	ot your native	language, what	is your Eng	Jlish proficien	cy? 🔲 Beginner		ntermediate	vance		
		tizen, what is yo	-							
Have you tal	cen any Englis	h proficiency ex	amination	s?						
IELTS	☐ Yes	Score			Date Taken					
MELAB										
TOEFL	_									
Others:	Others:									
If you are	currently serv	ving in the Unite	d States A	med Services	s, enter the two-di	git cod	le number of the bran	nch:		
10	Army (Regul	lar)	30	Marines (Reg	ular)	50	Coast Guard (Regula	r)		
15	Army (Reser	ves)	35	Marines (Res	erves)	55	Coast Guard (Reserv	es)		
20	Navy (Regul	ar)	40	Air Force (Re	gular)	60	National Guard (Arm	y)		
25	Navy (Reser	ves)	45	Air Force (Re	serves)	65	National Guard (Air)			
Other militar	y status:	None Mili	tary Family	Member \square	Dept of Defense Ci	vilian	☐ Veteran ☐ Na	tional Guard		
Base Name										

☐ If	f you	are eligible or currently rece	iving (GI Bill $^{ ext{ iny B}}$ benefits, enter the code number of the chapt	er:		
	70 MGIB-AD (Chapter 30) 95		95	Educational Assistance Test Program (Section 901)	115	Vocational Rehabilitation	
	75	MGIB-SR (Chapter 1606)	100	Educational Assistance Pilot Program (Section 903)	999	Not sure	
	80	REAP (Chapter 1607)	105	Survivors' and Dependents' Educational Assistance Program (Chapter 35)			
	85	VEAP (Chapter 32)	010	Post-9/11 (Chapter 33)			
Have you used your benefits previously?							
Please en	iter y	our discharge date					
Have you	ever	been enrolled in any prograi	m at E	xcelsior College (formerly Regents College)?			
Yes		No If Yes, when?					

Undergraduate Degree Selection (Select only one program) Term: Fall I Fall II Spring I Spring II Summer I Summer II _____Year **BUSINESS** LIBERAL ARTS **TECHNOLOGY** ☐ AAB Associate in Applied Science in AS Associate in Science in Liberal Arts AAT Associate in Applied Science in Technical Studies Administrative/Management Studies Military students should select the concentration which ☐ BSL Bachelor of Science in Liberal Arts corresponds to their MOS/Rating. ■ BPB Bachelor of Professional Studies— Area of concentration (select one) Area of concentration (select one) **Business and Management** No concentration No concentration LOG Logistics Operations Management **COMPT** Computer Technologies ■ BSB Bachelor of Science in Business ELECT Electromechanical Technologies Area of concentration (select one) BS Bachelor of Science in History ELINT NCPPT **ELINT** Electronic/Instrumentation Technologies ACCTG General Accounting BS Bachelor of Science in Natural Sciences Nuclear Technologies/ Power Plant FIN Finance Area of concentration (select one) NATSC No concentration BIO Biology Technologies **GENBU** General Business ■ BCY Bachelor of Science in Cybersecurity LM Logistics Management Area of concentration (select one) MHR Management of Human Resources ■ BS Bachelor of Science in Psychology GEN General Track COPS Cyber Operations MARK Marketing BS Bachelor of Science in Social Sciences Area of concentration (select one) ☐ BPT Bachelor of Professional Studies— **HEALTH SCIENCES** SOCSC No concentration HR Human Services Technology Management ■ AHS Associate in Science in Health Sciences Area of concentration (select one) ■ BHS Bachelor of Science in Health Sciences ■ BAL Bachelor of Arts in Liberal Arts EL Electrical Technology Area of emphasis (select one) No emphasis IT Information Technology Public Service NU Nuclear Technology HAW Health and Wellness ACJ Associate in Science in Criminal Justice RE Renewable Energy Technology MGT Management ■ BSP Bachelor of Science in Criminal Justice ☐ BEL Bachelor of Science in ☐ PBH Public Health **Electrical Engineering Technology (ABET** Area of concentration (select one) ■ BHC Bachelor of Science in Health Care Management accredited) No concentration Area of concentration (select one) CJ-H Homeland Security **ELEC** Electronics ☐ ELEC E ■ BHE Bachelor of Science in Homeland Security Power Systems and Emergency Management BIX Bachelor of Science in Information Technology Area of emphasis (select one) (ABET accredited) OP Open Emphasis Area of concentration (select one) BSP Bachelor of Science in Military Leadership CYS Cybersecurity Technology ■ BSP Bachelor of Science in National Security GEN General Area of concentration (select one) NETO Network Operations INSA Intelligence and Security Analysis BNX Bachelor of Science in TOPIC Topics in National Security Nuclear Engineering Technology (ABET accredited)

Area of undergraduate concentration (select one)

NC Nuclear Cybersecurity
NL Nuclear Leadership

General

Graduate Degree and Certificate Selection (Select only one program) Term: Fall I Fall II Spring I Spring II Summer I Summer II _____Year BUSINESS **HEALTH SCIENCES PUBLIC SERVICE** TECHNOLOGY ■ MBA Master of Business ■ MHC Master of Science in ■ MCJ Master of Science in ■ MCY Master of Science Administration Health Care Administration Criminal Justice in Cybersecurity Area of concentration (select one) Area of concentration (select one) ☐ MHS Master of Science in Area of concentration (select one) GEN ACFI ■ No concentration General Business ☐ GEN General Track Health Sciences Finance and Accounting Area of concentration (select one) ☐ CBC Cannabis Control ■ INFAS Information Assurance □ СВС ☐ GEN General Track ■ HS Homeland Security and Cannabis Control ☐ HCM ■ CBC Cannabis Control **Emergency Management** Health Care Management ☐ PH Public Health ☐ HR ■ MPA Master of Public Administration Human Resource Management Area of concentration (select one) □ LDR ■ No concentration Leadership MKTG Marketing ☐ CBC Cannabis Control ■ MSM Master of Science in Management Area of concentration (select one) ■ GENB General Business Management ☐ HRM Human Resource Management Organizational Leadership ■ MHR Master of Science in Human Resource Management with an Emphasis in Diversity and Technology ■ MOL Master of Science in Organizational Leadership with an Emphasis in Technology and Data Analytics GRADUATE CERTIFICATES ☐ CPM Graduate Certificate in Advanced Project Management ☐ CBC Graduate Certificate in Cannabis Control ☐ CDA Graduate Certificate in **Data Analytics** ☐ CDW Graduate Certificate in **Distributed Workforce** Management CCO Graduate Certificate in **Cybersecurity Operations** ☐ CEM Graduate Certificate in Homeland Security and **Emergency Management** CLD Graduate Certificate in Leadership ☐ CNU Graduate Certificate in Nutrition ☐ CPH Graduate Certificate in Public Health Equity

Graduate certificates are not eligible for

federal financial aid.

Check th	he appropriate box(es) for any	degree(s) yo	u have	already earned: Associate [□ Baccalaureate □ Master's
Degree				Year	Name of college/university
Degree				Year	Name of college/university
Degree				Year	Name of college/university
Parenta	l Education Level				
		P		Parent 2	
	finish high school				
	ed some college but did not gradu				
Comple	eted an associate degree (AA, AS,	AAS, etc.)			
Comple	eted a bachelor's degree (BA, BS,	etc.)			
Comple	Completed a master's degree (MA, MS, MBA, etc.)				
Comple	eted a doctorate degree (PhD, JD,	MD, etc.)			
Do not	know				
Your an	nual household income				
	Less than \$24,999		\$70,0	000 to \$84,999	
	\$25,000 to \$34,999		\$85,0	000 to \$99,999	
	\$35,000 to \$44,999		\$100	,000 to \$119,999	
	\$45,000 to \$54,999		Over	\$120,000	
	\$55,000 to \$69,999		-		
All Ar	oplicants: Document	s Submi	tted 1	for Evaluation	
you woul cannot be	institution that will be submitting od like to be considered. We will pro	ocess your app ts. Official trans	olication scripts a	once all official transcripts listed have l re those that a college, testing agency.	ch you have previously earned college-level credits and that been received. Do not submit unofficial transcripts as they or education office submits directly to: Excelsior College,
				eeks or less and must have two forms numbers of your Social Security numb	of ID on the transcript (e.g., Social Security number er and date of birth).
					t transcripts on the student's behalf. Excelsior College reserves uments will result in academic dismissal from the College.
Name of co	ollege/university			City	State

City

State

Name of college/university

Examination Transcripts List any exams from which you will have score reports submitted (Excelsior College* Examinations, UExcel*, CLEP Exams, DANTES Exams, or Advanced Placement (AP)): Type of exam Exam title Year taken Type of exam Exam title Year taken Type of exam Exam title Year taken **Professional/Corporate Training Courses** List completed professional/corporate training that has been evaluated by ACE or the National College Credit Recommendation Service: Organization Year taken Organization Year taken Organization Year taken Military/Professional Training All military branches except Air Force list Joint Services Transcript (JST); Air force enlisted personnel list Community College of the Air: Active Duty/Guard/Reserve Military Authorization As a student enrolling in Excelsior College, I agree to respond promptly to information requested by either my ESO/Education Counselor or Excelsior College regarding my studies, to notify my ESO/Education Counselor and Excelsior College of any change in name, address, or Social Security number, and to meet all of my financial

For graduate students only

Signature

List all previously completed graduate-level courses submitted for consideration. (Include syllabus and/or catalog description for any course for which content cannot clearly be determined by the title. For School of Nursing candidates, the course syllabus is required.)

obligations to Excelsior College. Since my ESO/Education Counselor will assist me in planning a course of study, I have authorized my ESO/Education Counselor to submit official documents on my behalf. I also authorize Excelsior College to release to my ESO/Education Counselor pertinent information regarding my status in

Excelsior College, including copies of My Academic Plan and other information related to my studies and status in the program.

PREFIX	TITLE	TERM/ YEAR TAKEN	INSTITUTION	GRADE

Graduate Degree Candidates

Please direct any questions you may have as you complete this application to the Admissions Office at 888-647-2388, or email GradAdmissions@excelsior.edu.

Checklist of Application Materials

My bachelor's degree was obtained through Regents College/Excelsior College. I do not need to submit an official transcript for my undergraduate degree.

My bachelor's degree transcript has been requested.

College name

Official transcripts of graduate coursework and/or degrees, if applicable.

Signature and Date (Required)

I certify that the information I have provided is true, and I affirm I have read the Disclosure Notifications presented on the Excelsior College website. I also understand that the review of my credentials will be performed based on the information I have provided to the Admissions Office at the time it is submitted.

Additionally, I agree to abide by the College policies as outlined in the Excelsior College Student Policy Handbook.

Note: You are applying to a specific term. Please keep in mind that once admitted, you must register for a course or exam or transfer in new credit (this must be credit that is earned after your application review and does not appear on your initial evaluation) by the term start date. If you need to delay your start, contact your admissions counselor. You may defer your start term by two 8-week terms only or you must reapply and go through the admissions process again.

Signature Date

Mailing

Email your completed application to: application@excelsior.edu

If mailing, submit to:

Excelsior College Admissions Office 7 Columbia Circle, Albany, NY 12203-5159

FAX: 518-464-8833

