# **MILITARY AND VETERAN**

Date of birth (mm/dd/yyyy format) \_\_\_\_\_ Gender

JNDERGRADUATE APPLICATION FOR				FUR OFFICE USE UNLY		
ADMISSION A Please print or type all inform		Special Pop	ulation			
Social Security number (I	<b>USA)</b> (Federal Aid ap					
Current legal name						
ast (Family) name		Firs	t (Given) name			Middle initial
Birth/maiden name (If different from co	urrent last name)	Other r	name(s) (By which you may hav	e been identifie	ed in relevant academic re	ecords)
Permanent address			Mailing addres	s		
Number and street (include Rd. St., Ave	, etc., as well as Apt. or S	uite number if applicable)	Number and street (inc	lude Rd. St., Av	e., etc., as well as Apt. or	Suite number if applicable)
City		State	City			State
Zip code Cou	ıntry (If not USA)		Zip code	Со	untry (If not USA)	
Please provide the state or territory  Contact information (Indic		ocar, coaco mio aling,				
Home phone	(d)/(e)	Business phone	Extensio	n (d)/(e)	Mobile phone	(d)/(e)
Email address						
Electronic Communic	ations Consen	t				
Electronic Communic Academic Evaluations Whenever the College evaluates toward your academic program a this document at the Excelsior Co	the credits you have eand which credits you	earned, you will receive you still need to earn. We will I	notify you via email each t	me your aca	demic plan is updated	d, and you can view
Academic Evaluations Whenever the College evaluates coward your academic program a	the credits you have eand which credits you ollege website conver	earned, you will receive you still need to earn. We will n iiently and without delay. P	notify you via email each t lease make certain that yo	me your aca ou complete y	demic plan is updated your email address ab	d, and you can view nove.
Academic Evaluations Whenever the College evaluates toward your academic program a this document at the Excelsior Co	the credits you have e and which credits you ollege website conver eive electronic deliv	earned, you will receive you still need to earn. We will n iiently and without delay. P very of your academic ev	notify you via email each t lease make certain that yo raluations, check this bo	me your aca ou complete y	demic plan is updated your email address ab	d, and you can view nove.

☐ It ha	ıs beei	n longer than 12 months since I	gradu	d a GED, or completed a High Sc ated from high school, earned my GEI months.  Yes, I have obtained	or High School Equ	iivalen	cy Test
Since c	omple	eting high school, have you	taken	at least one course in any collec	je, university, or te	echnic	cal school? Yes No
If yes, I	ist all	previously earned degree(s	):				
		TYPE OF DEGREE	DA	TE DEGREE EARNED INSTIT	JTION GRANTING DEG	GREE	CHECK IF YOU ARE SENDING A TRANSCRIPT
							See page 5 for information regarding transcripts.
	colleg	e courses, proficiency tests,	milita	ry courses, and so forth.			ollege credits you have earned through
	<b>1:</b> N	No credit/courses 2: 1 to 30	credit	s <b>3:</b> 31 to 60 credits <b>4:</b> 61	to 90 credits 5:	91 to	126 credits 6: Over 126 credits 7: I don't know
Are you	Hispa	anic or Latino/Latina?	es/	□ No			
_				h regardless of your answer to the African American  White			y select more than one): n or Other Pacific Islander
Please	select	the one response which best	refle	cts your citizenship status:	.S. citizen U.S.	. perm	anent resident  Foreign national
Is Englis	sh you	ı <b>r first language?</b> Yes	□ No	)			
	10 15 20 25	Army (Regular) Army (Reserves) Navy (Reserves) Navy (Reserves)	3	States Armed Services, enter the Marines (Regular) Marines (Reserves) Marines (Reserves) Marines (Reserves) Marines (Reserves) Marines (Reserves)	two digit code num  50   Coast Guard  55   Coast Guard  60   National Gu  65   National Gu	d (Reg d (Resource) ard (A	ular) erves) .rmy)
MOS, I	NER, C	CGR, etc.	Base	zip code	Pa	ay Gra	de
Other m	ilitary	status: Military veteran		Military family member with Departme	ent of Defense card		Department of Defense civilian employee
Military ID	Numbe	r					
	If vou	are eligible or currently rece	ivina	GI Bill benefits, enter the code nun	nher of the chanter		
	70	MGIB-AD (Chapter 30)	95	Educational Assistance Test Progra	•	115	Vocational Rehabilitation
	75	MGIB-SR (Chapter 1606)	100	Educational Assistance Pilot Progra	·····	999	Not sure
	80	REAP (Chapter 1607)	105	Survivors' and Dependents' Educational Assistance Program (C			
	85	VEAP (Chapter 32)	010	Post-9/11 (Chapter 33)			
Have yo	u use	d your benefits previously?		Yes No If not, have you	ı completed VA forr	m 22-	1990?
If you an	swered	d No, complete the correct form of	nline a			5? [	Yes No
Have you		r been enrolled in any program No If Yes, when?	n at E	xcelsior College (formerly Regents	College)?		

## Undergraduate Degree Selection (Select only one program)

BUSINESS	LIBERAL ARTS	TECHNOLOGY
BUSINESS  □ AAB Associate in Applied Science in Administrative/Management Studies □ BPB Bachelor of Professional Studies—	LIBERAL ARTS  AS Associate in Science in Liberal Arts BSL Bachelor of Science in Liberal Arts  Area of concentration (select one).  No concentration  LOG Logistics Operations Management  BS Bachelor of Science in History  BS Bachelor of Science in Natural Sciences  Area of concentration (select one).  NATSC No concentration  BIO Biology  BS Bachelor of Science in Psychology  BS Bachelor of Science in Social Sciences  Area of concentration (select one).  SOCSC No concentration  HR Human Services  BAL Bachelor of Arts in Liberal Arts  Public Service  ACJ Associate in Science in Criminal Justice  Area of concentration  CJ-H Homeland Security  BHE Bachelor of Science in Homeland Security and Emergency Management  Area of emphasis (select one).	TECHNOLOGY  AAT Associate in Applied Science in Technical Studies  Military students should select the concentration  which corresponds to their MOS/Rating.  Area of concentration (select one)  COMPT Computer Technologies  ELECT Electromechanical Technologies  ELINT Electronic/Instrumentation Technologies  NCPPT Nuclear Technologies/ Power Plant Technologies  BCY Bachelor of Science in Cybersecurity  Area of concentration (select one)  GEN General Track  COPS Cyber Operations  BPT Bachelor of Professional Studies— Technology Management  Area of concentration (select one)  EL Electrical Technology  NU Nuclear Technology  IT Information Technology  NU Nuclear Technology  RE Renewable Energy Technology  BEL Bachelor of Science in Electrical Engineering Technology (ABET accredited)  Area of concentration (select one)  ELEC Electronics  POWER Power Systems  BIX Bachelor of Science in Information Technology
	□ OP Open Emphasis □ BSP Bachelor of Science in Military Leadership □ BSP Bachelor of Science in National Security  Area of concentration (select one). □ INSA Intelligence and Security Analysis □ TOPIC Topics in National Security	(ABET accredited)  Area of concentration (select one)  CYS Cybersecurity Technology  GEN General  NETO Network Operations  BNX Bachelor of Science in  Nuclear Engineering Technology (ABET accredited)  Area of undergraduate concentration (select one)  General  NC Nuclear Cybersecurity  NL Nuclear Leadership

#### 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 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.

Signature							Date
☐ Joir	nt Services Transcript (By checking th	nis box I a	uthorize	Excelsior College to r	equest my Joint Servi	ces Transcript)	
Educati	on Center Address						
Emplo	oyer Information						
-		Yes, par	rt-time	Yes, full-time			
-							
T emplo	oyed, who is your employer?	e of employ	er				
	nd street address of employer				State	Zip code	Country (if not USA)
umber ar	ia street address of employer				otate	Zip code	Country (if not COA)
f emplo	oyed, what is your job title?						
	Job title the appropriate box(es) for any degr		u have	already earned: [	☐ Associate ☐ Ba	accalaureate	
Check t	Job title		u have	already earned: [	☐ Associate  ☐ Ba	accalaureate	
Check t	Job title	ree(s) yo	u have	already earned: [	□ Associate □ Ba	accalaureate	
Check t Parenta	Job title	ree(s) yo			☐ Associate ☐ Ba	accalaureate	
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### **Documents Submitted for Evaluation**

#### **Transcripts**

List each institution that will be submitting official transcripts on your behalf. Only list institutions from which you have previously earned college-level credits and that you would like to be considered. We will process your application once all official transcripts listed have been received. Do not submit unofficial transcripts as they cannot be used to evaluate your prior credits. Official transcripts are those that a college, testing agency, or education office submits directly to: Excelsior College, Office of the Registrar, 7 Columbia Circle, Albany, NY 12203-5159.

**Note:** The issuance date of the transcript must be within three weeks or less and must have two forms of ID on the transcript (e.g. social security number and current address, current address and date of birth).

Official transcripts must be submitted at the request of the student. Excelsior College does not request transcripts on the student's behalf. Excelsior College reserves the right to verify all transcripts/documents received to ensure authenticity. Submission of fraudulent documents will result in academic dismissal from the College.

Name of college/university	City	State
Name of college/university	City	State
Name of college/university	City	State
Military/Professional Training		
All military branches except Air Force list Joint Ser	vices Transcript (JST); Air force enlisted personnel list Commun	ity College of the Air Force
Organization		
Organization		
Organization		





## **ENROLLMENT AGREEMENT**

Complete and submit this form indicating your enrollment option and acknowledging the terms of enrollment.

Student Name		Date
Student ID #	Degree	
If you have questions regarding at +1 (518)-464-8500.	current fees, enrollment options, or payme	nt plans, contact our Admissions Office at <b>888-647-2388</b> or internationally
undergraduate candidates fo	hoice. Payment can be made in full or throu or any Excelsior College degree. If you will l esses through the <b>MyExcelsior</b> dashboard,	igh one of our convenient payment plans. The options are available to all be taking advantage of the payment plan option, payment plans are available througl or call us at <b>888-647-2388</b> , and follow the current student prompt to the Student
There is no fee for studer Technical Studies or Adm	nts who agree to complete a minimum of 12 ninistrative/Management Studies) during the College course credits for associate degre	2 Excelsior College course credits (6 course credits for Associate in Applied Science in eir term of enrollment. For military and military family students who agree to complet ees and 15 Excelsior College course credits for bachelor's degrees during their term of the course credits for bachelor's degrees during their term of the course credits for bachelor's degrees during their term of the course credits for bachelor's degrees during their term of the course credits for bachelor's degrees during the credits for bachelor's during the credits for
12 credits in online cours the BS Completion Progr. Payment in full by ch Pay by credit card. If Pay Your Way Payme	e work at Excelsior before you graduate, ch am for RNs or a RN to MS in Nursing progra leck enclosed. paying by credit card, call us at 888-647-23 ent Plan. Choose from a minimum of two to	mbers, veterans, and military family members pay \$760 °. If you'll earn fewer than noose the Multi-Source Option. Note: Do not choose this option if you are enrolling in im. Choose ONE option below.  388 and follow the current student prompt to the Student Financial Services Team. a maximum of six monthly payments. If you are using a payment plan and are unable it, call us at 888-647-2388 and follow the current student prompt to the Student
Financial Services tea  B. Graduate Student Enrollm	am. nent Options	Fee of <b>\$265</b> . This fee is paid annually, on the anniversary of your enrollment.
$\square$ Payment in full by ch		Fee. 388 and follow the current student prompt to the Student Financial Services Team.
Include appropriate payment. Ma		le to Excelsior College in U.S. dollars drawn on a U.S. bank. Do not send cash. This
		continued on next page

① The fee for military servicemembers, veterans, and military family members applies to all branches, active duty, National Guard, Reserve, and military family members who hold a U.S. Uniformed Services Identification and Privilege Card.

Submit your completed Enrollment Agreement and, if applicable, send payment to:

**Excelsior College Bursar's Office** 7 Columbia Circle Albany, NY 12203-5159

Email: receipt@excelsior.edu

FAX: **518-464-8777** 

I understand that in order to be considered an enrolled student at Excelsion submission of this Enrollment Agreement. Credit-bearing activity at Excelsion transferring in new credit (this must be credit that does not appear on the inimonths will result in the expiration of my admission status, at which point I we source fee refund policy included in the tuition and fee schedules and have a as listed in the payment options section of this form.	r College includes registering for an Excelsior course or exam and/or itial evaluation). Failure to engage in credit-bearing activity within six vould be required to re-apply. I have also read and understand the multi-
Signature	Date





## MILITARY AND VETERAN IDENTITY VERIFICATION

▶ If you are unable to complete the identity verification online, complete all information on this form in the presence of a Notary or Excelsior College employee

	Look A dinito of CCN	Chindren ID Nimelea
ne (first, last)	Last 4 digits of SSN	Student ID Numbe
pe of valid, government-issued, photo identification viewed b	y Signee:	
Driver's License (or other state-issued photo ID)		
Passport		
Other (valid, government-issued photo ID)		
u are required to provide a copy of the ID viewed along with	this notarized form.	
tudent (must sign)		
ttest that I am the above named person.		
gnature		Date
,		
xcelsior College Employee/Military Command	ing Officer identification varification	
	have viewed the above photo	o identification
	for the purposes of attending Excelsion	
		Date
nature		
otary identification verification		County of
otary identification verification		County of
otary identification verification  ate of  I hereby certify that on this day of	, 20 personally appeared before me the signer of the above valid form of identification as proof of his or her id	and subject of the above form

Mail, email or fax your completed Identity Verification form to:

Excelsior College, Office of the Registrar 7 Columbia Circle, Albany, NY 12203-5159 EMAIL: records@excelsior.edu

FAX: **518-608-8142** 

