



UNDERGRADUATE AND GRADUATE ADMISSION

Congratulations on taking the next step toward earning your degree.

NEXT STEPS:

1. 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 identity verification form. Go to www.excelsior.edu/MyExcelsior and click on the My Details tab to complete the verification requirement or complete and submit the notarized identity verification form included in this document.
4. 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 GRADUATE APPLICATION FOR ADMISSION

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)

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FOR OFFICE USE ONLY

Special Population

Third Party

Current legal name

Last (Family) name

First (Given) name

Middle initial

Birth/maiden name (If different from current last name)

Other name(s) (By which you may have been identified in relevant academic records)

Permanent address

Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable)

City

State

Zip code

Country (If not USA)

Mailing address

Number and street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable)

City

State

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 (D)ay or (E)vening)

Home phone

(d)/(e)

Business phone

Extension

(d)/(e)

Mobile phone

(d)/(e)

Email address

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.

Date of birth (mm/dd/yyyy format) □□/□□/□□□□

Gender □

Have you graduated from high school, received a GED, or completed a High School Equivalency Test in the past 12 months?

- It has been longer than 12 months since I graduated from high school, earned my GED or High School Equivalency Test.
 Yes, I graduated from high school in the past 12 months. Yes, I have obtained my GED or High School Equivalency Test in the last 12 months.
 No

Since completing high school, have you taken at least one course in any college, university, or technical school? Yes No

If yes, list all previously earned degree(s):

TYPE OF DEGREE	DATE DEGREE EARNED	INSTITUTION GRANTING DEGREE	CHECK IF YOU ARE SENDING A TRANSCRIPT
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

See page 9 for information regarding transcripts.

From the list below, enter the code number which represents your estimate of the total number of college credits you have earned through college courses, proficiency tests, military courses, and so forth.

- 1: No credit/courses | 2: 1 to 30 credits | 3: 31 to 60 credits | 4: 61 to 90 credits | 5: 91 to 126 credits | 6: Over 126 credits | 7: I don't know

Are you Hispanic or Latino/Latina? Yes No

Select the racial/ethnic group(s) you identify with regardless of your answer to the above question (you may select more than one):

- American Indian or Alaska Native Black or African American White Asian Native Hawaiian or Other Pacific Islander

Please select the one response which best reflects your citizenship status: U.S. citizen U.S. permanent resident Foreign national

Is English your first language? Yes No

International Students (Only): Country of Citizenship _____ Country of Birth _____

Have you taken any English proficiency examinations?

- IELTS Yes Score _____ Date Taken _____
 MELAB Yes Score _____ Date Taken _____
 TOEFL Yes Score _____ Date Taken _____

Others: _____

If you are currently serving in the United States Armed Services, enter the two digit code number of the branch:

10	Army (Regular)	30	Marines (Regular)	50	Coast Guard (Regular)
15	Army (Reserves)	35	Marines (Reserves)	55	Coast Guard (Reserves)
20	Navy (Regular)	40	Air Force (Regular)	60	National Guard (Army)
25	Navy (Reserves)	45	Air Force (Reserves)	65	National Guard (Air)

Other military status: Military veteran Military family member with Department of Defense card Department of Defense civilian employee

Military ID Number _____ Base zip code - Pay Grade

MOS, NER, CGR, etc.

If you are eligible or currently receiving GI Bill benefits, enter the code number of the chapter:

70	MGIB-AD (Chapter 30)	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? Yes No If not, have you completed VA form 22-1990? Yes No

If you have used your benefits and are changing parent schools, have you completed VA form 22-1995? Yes No

If you answered No, complete the correct form online at www.gibill.va.gov.

Have you ever been enrolled in any program at Excelsior College (formerly Regents College)?

Yes No If Yes, when? _____

Undergraduate Degree Selection (Select only one program)

BUSINESS

- AAB** Associate in Applied Science in Administrative/Management Studies
- BPB** Bachelor of Professional Studies—Business and Management
- BSB** Bachelor of Science in Business
Area of concentration (select one).
 - ACCTG General Accounting
 - FIN Finance
 - GENBU General Business
 - LM Logistics Management
 - MHR Management of Human Resources
 - MARK Marketing

HEALTH SCIENCES

- AHS** Associate in Science in Health Sciences
- BHS** Bachelor of Science in Health Sciences
Area of emphasis (select one).
 - No emphasis
 - HAW Health and Wellness
 - MGT Management
 - PBH Public Health
- BHC** Bachelor of Science in Health Care Management

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).
 - SOCSOC No concentration
 - HR Human Services
- BAL** Bachelor of Arts in Liberal Arts

Public Service

- ACJ** Associate in Science in Criminal Justice
- BSP** Bachelor of Science in Criminal Justice
Area of concentration (select one).
 - No concentration
 - CJ-H Homeland Security
- BHE** Bachelor of Science in Homeland Security and Emergency Management
Area of emphasis (select one).
 - 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

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
 - 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 (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

Graduate Degree and Certificate Selection (Select only one program)

BUSINESS

- MBA** Master of Business Administration
 - Area of concentration (select one).*
 - No concentration
 - ACCTG** General Accounting
 - HCM** Health Care Management
 - HR** Human Resource Management
 - LDR** Leadership
 - CBC** Cannabis Control
- MSM** Master of Science in Management
 - Area of concentration (select one).*
 - GENB** General Business Management
 - HRM** Human Resource Management
 - OL** Organizational Leadership

HEALTH SCIENCES

- MHC** Master of Science in Health Care Administration
- MHS** Master of Science in Health Sciences
 - Area of concentration (select one).*
 - GEN** General Track
 - PH** Public Health
 - CBC** Cannabis Control

PUBLIC SERVICE

- MCJ** Master of Science in Criminal Justice
 - Area of concentration (select one).*
 - No concentration
 - HS** Homeland Security and Emergency Management
 - CBC** Cannabis Control
- MPA** Master of Public Administration
 - Area of concentration (select one).*
 - No concentration
 - CBC** Cannabis Control

TECHNOLOGY

- MCY** Master of Science in Cybersecurity
 - Area of concentration (select one).*
 - GEN** General Track
 - INFAS** Information Assurance

CERTIFICATE

- CBC** Graduate Certificate in Cannabis Control

Employer Information

Are you currently employed? No Yes, part-time Yes, full-time

If employed, who is your employer? _____
Name of employer

Number and street address of employer _____ State _____ Zip code _____ Country (if not USA) _____

If employed, what is your job title? _____
Job title

Check the appropriate box(es) for any degree(s) you have already earned: Associate Baccalaureate

Parental Education Level

	Mother	Father
Did not finish high school	<input type="checkbox"/>	<input type="checkbox"/>
Attended some college but did not graduate	<input type="checkbox"/>	<input type="checkbox"/>
Completed an associate degree (AA, AS, AAS, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a bachelor's degree (BA, BS, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a master's degree (MA, MS, MBA, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Completed a doctorate degree (PhD, JD, MD, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Do not know	<input type="checkbox"/>	<input type="checkbox"/>

Your annual household income

<input type="checkbox"/> Less than \$24,999	<input type="checkbox"/> \$70,000 to \$84,999
<input type="checkbox"/> \$25,000 to \$34,999	<input type="checkbox"/> \$85,000 to \$99,999
<input type="checkbox"/> \$35,000 to \$44,999	<input type="checkbox"/> \$100,000 to \$119,999
<input type="checkbox"/> \$45,000 to \$54,999	<input type="checkbox"/> Over \$120,000
<input type="checkbox"/> \$55,000 to \$69,999	

All Applicants: 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 Registration and Records, 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, last four numbers of your Social Security number 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

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 National College Credit Recommendation Service:

Organization	Year taken
Organization	Year taken
Organization	Year taken

For graduate students only

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.)

PREFIX	TITLE	TERM/ YEAR TAKEN	INSTITUTION	GRADE

Graduate Degree Candidates: Special Instructions and Admission Requirements

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 above statements are true and correct. I understand that false information or documents may result in dismissal from the College, and that it is my responsibility to submit all required information. I agree that if accepted for enrollment in the College, I will comply with and be bound by all requirements and policies of the College, as set forth in this form, the student policies webpage, and the catalog pertaining to the program in which I am seeking to enroll. My signature below indicates I have read the Required State Disclosure Notifications presented on the Excelsior College website (www.excelsior.edu/about/transparency).

Signature

Date

Mailing

Submit your completed application to:

Excelsior College Bursar's Office

7 Columbia Circle, Albany, NY 12203-5159

FAX: 518-464-8700



**EXCELSIOR
COLLEGE**

7 Columbia Circle, Albany, New York 12203-5159
518-464-8500 • Toll Free: 888-647-2388 • TDD 518-464-8501 • www.excelsior.edu

Excelsior College is committed to providing a learning and working environment that is free from illegal discrimination based upon an individual's race, ethnicity, national origin, age, religion, marital status, familial status, gender, gender identity, sexual orientation, physical or mental disability, genetic information, or military or veteran status. Illegal discrimination in any form will not be tolerated at the College. Portions of this publication can be made available in a variety of formats upon request.

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