NURSING
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)

□□□-□□-□□□□

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   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)

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
			☐
			☐
			☐

See 5 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

_____   Base zip code ☐☐☐☐☐-☐☐☐☐   Pay Grade ☐☐☐
Military ID Number

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? _____

Before selecting a degree program, see admission requirements beginning on page 6

Undergraduate Degree Selection (Select only one program)

NURSING
Note the admissions eligibility requirements on page 6.

☐ AAS   Associate in Applied Science/
           Associate in Science in nursing
☐ BS   Bachelor of Science in nursing Completion Program (RNs only)
☐ RN to MSNI   RN to Master of Science in nursing Informatics [1][2]
☐ RN to MSNE   RN to Master of Science in nursing Education [1][2]
☐ RN to MSNL   RN to Master of Science in nursing Leadership
               and Administration of Health Care Systems [1][2]

Graduate Degree Selection

NURSING
☐ MSNI   Master of Science in Nursing Informatics
☐ MSNE   Master of Science in nursing Education
☐ MSNL   Master of Science in nursing Leadership
         and Administration of Health Care Systems

[1] If you have earned a bachelor's degree in nursing from a regionally accredited institution and hold a valid and current U.S. RN license, you may be interested in pursuing our Master of Science in Nursing degree. If so, call an enrollment counselor before completing this application.

[2] MRN applicants must submit a completed MS capstone requirement form (excelsior.edu/capstone).

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

Education Center Address

_____

_____

_____

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	☐	☐
Attended some college but did not graduate	☐	☐
Completed an associate degree (AA, AS, AAS, etc.)	☐	☐
Completed a bachelor's degree (BA, BS, etc.)	☐	☐
Completed a master's degree (MA, MS, MBA, etc.)	☐	☐
Completed a doctorate degree (PhD, JD, MD, etc.)	☐	☐
Do not know	☐	☐

Your annual household income

☐	Less than $24,999	☐	$70,000 to $84,999
☐	$25,000 to $34,999	☐	$85,000 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		

4

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

Instructions and Admission Requirements

Nursing courses completed at institutions other than Excelsior College are only evaluated upon enrollment. Associate degree in nursing students only: Note some state boards of nursing have additional requirements for licensure. Be sure to visit www.excelsior.edu/board_requirements for current information specific to each state.

Associate degree in nursing program (please check the box corresponding to your current level of nursing experience):

Note: If you do not see your health care profession listed, you are not eligible for admission to the associate nursing degree programs at this time. Before continuing with this application, please stop here and call admissions at 888-647-2388, ext. 2 to discuss eligibility as the application fee is non-refundable.

☐	Licensed Practical or Vocational Nurse (LPN or LVN)	We are usually able to verify most LPN/LVN licenses online with the exception of Louisiana. Therefore, Louisiana applicants must submit their license.
☐	Paramedic	Copy of current state or national certification.
☐	Certain Classifications of Military Medical Personnel (see below)	Official JST (Joint Services Transcript) or CCAF transcript. Additional documentation may be required. See Associate Nursing Admission Criteria for Military Personnel.

Additional criteria for associate degree nursing students (including military personnel)

In addition to qualifying for admission by meeting one of the valid health care backgrounds noted above, **you must also meet both criteria below:**

▷ Earn the minimum required score, as established by the School of Nursing, on the Test of Essential Academic Skills (TEAS). The scores noted below must be earned on a single attempt and no more than one year prior to your application date: Reading: 69% Mathematics: 63.3% Science: 45.8% English: 60%

Note: There are no exceptions to the above. You should not submit an application until you have achieved the required scores noted above and met all other eligibility criteria in effect at that time. TEAS score reports must be requested and sent directly from ATI (www.atitesting.com). For detailed instructions on creating and registering an account with ATI as well as purchasing your TEAS scores, visit www.excelsior.edu/programs/nursing/nursing-associate-degree and click on the Policy Changes link on the right-hand side of the page.

Note: When you register for the TEAS, you must provide ATI with your date of birth (MM/DD) and the same email address you provided to Excelsior College. These two unique identifiers are necessary to match your TEAS transcript with your Excelsior College student record. Without them we cannot ensure acceptance of your score.

▷ Submit a completed Verification of Health Care Experience (VHCE) form, signed by your supervisor. The VHCE form expires three (3) months from the date of your supervisor's signature. You may download this form from www.excelsior.edu/vhce.

Important: In addition to submitting a VHCE form upon application to the program, students will need to submit a new VHCE form no more than three (3) months prior to FCCA eligibility.

Associate Nursing Admission Criteria for Military Personnel

The following military occupations meet the Excelsior College School of Nursing admission criteria.

Active Duty: Admission is limited to servicemembers who are on active duty, National Guard, or reserves, and currently working in one of the military occupations noted below.

(See the **Additional criteria for associate degree nursing students** on 6.)

Primary Army MOS	
HEALTH CARE SPECIALIST	68W (w/specific Army Skill Identifiers[①]) ▶ F2 Army Flight Paramedic ▶ F3 Army Flight Medic ▶ M6 Army LPN (pre-October 1, 2013) ▶ W1 Special Operations Combat Medic
SPECIAL FORCES MEDICAL SGT.	18D
PRACTICAL NURSE SPECIALIST	68C
CIVIL AFFAIRS MEDICAL TRAUMA SERGEANT	38B (w/a specific skill identifier of W1, W2 or W4)

① Army Special Skill Identifiers are noted on the official JST (Joint Services Transcript) and/or on an Army ERB (Enlisted Record Brief) or NCOER (Noncommissioned Officer Evaluation Report). Official copy is required.

Navy rating/classification	
HOSPITALMAN	NER HN
HOSPITAL CORPSMAN	NER HM
INDEPENDENT DUTY CORPSMAN	NEC 8425
NAVY SPECIAL WARFARE MEDIC	NEC 5392[①]

① In addition to holding the NEC rating, the applicant must also have completed Army course Special Operations Combat Medic (SOCM) ACE Guide Number AR-0801-0036 on/after October 2005.

Air Force AFSC (NOTE: "X" indicates level; e.g. 1, 3, 5, etc.)	
AEROSPACE MEDICAL SERVICE NEURODIAGNOSTIC TECHNICIAN INDEPENDENT DUTY MEDICAL TECHNICIAN FLIGHT AND OPERATIONAL MEDICAL TECHNICIAN	4N0X1
PARARESCUE	1T2X1

Coast Guard rating	
HEALTH SERVICES TECHNICIAN	HS

For All Nursing Students

Nursing courses completed at institutions other than Excelsior College are only evaluated upon enrollment. For up to three licenses/certifications, indicate:

State in which you hold your certification or licensure	License number	License expiration date	Former name(s) by which you have been identified

International Nurses

Admission to the associate degree in nursing program is not open to international students. Visit international.excelsior.edu for more information.

Admission to the RN to BS and RN to MS is open to international students. In addition to official transcripts, nursing candidates must demonstrate that they hold an equivalent U.S. Registered Nurse (RN) license. The applicant must be a graduate from an approved school of nursing in their country of education and hold a current, unencumbered nursing license (if licensed in multiple jurisdictions and/or countries, all licenses must be unencumbered). All nursing school transcripts and all licenses will be validated by primary source verification.

International candidates must apply to the Commission on Graduates of Foreign Nursing Schools International (CGFNS International), New York Credential Verification Service (NYCVS), and the New York State Education Department (NYSED) to have their foreign nursing education evaluated and approved by the aforementioned organizations. For more information, visit www.cgfns.org/sections/programs/cvs/.

Since the NYSED only issues an official NCLEX eligibility document to applicants directly, and will not send the document to Excelsior College, international applicants must forward the unopened official NCLEX eligibility document to Excelsior College. When international applicants receive the official NYSED document in its sealed envelope, they must insert the unopened envelope into an outer envelope and forward it to Excelsior College. International applicants should also write their full name, permanent address, and date of birth on the outer envelope.

For the evaluation of credentials from outside the United States, all applicants must use one of the approved agencies noted previously. CGFNS New York Credential Verification Service (NYCVS) and the International Consultants of Delaware (ICD) Course by Course Services are offering Excelsior College applicants a discount when using their combined services. This bundle service package represents significant savings with a discount being applied to the ICD Course by Course Service. This one-stop service helps applicants reduce expenses and save time in completing all the required procedures necessary for admission. Applicants who choose to apply for NYCVS and the ICD Course by Course service separately will pay the full price. Applicants who wish to take advantage of this bundle service package must visit https://www.cgfns.org/cerpassweb/contactUs.do and submit their questions to Ms. Janette McCoy at CGFNS. After connecting to the webpage, please follow the instructions below to submit your questions.

- Ignore the error or warning texts in red
- For the "Who are you?" question, please select "Other" from the drop-down list
- Answer the questions by providing your first name, last name, and email address
- Select "Credential Verification Service for New York State" radio button under "Service"
- Select the last option "NY/Excelsior" from the drop-down list under "Subject"
- Type in your questions or comments, then click "Submit Form" button. Your email will be directed to Ms. Janette McCoy's attention at CGFNS.

All official documents must be in sealed envelopes from the original source. In the event that Excelsior College receives an opened document, it will be considered unofficial and will not be considered for eligibility or evaluation; the opened document will be returned to the applicant. In this case, it becomes the applicant's responsibility to contact NYSED or ICD and request another official copy to be forwarded, unopened to Excelsior College by the applicant.

RN to BS in nursing and RN to MS in nursing Programs

Admission to both the BS in nursing program and RN to MS in nursing program is limited to Registered Nurses (RNs) who are currently licensed in the U.S.		
☐	Registered Nurse (RN)	*You must submit an official transcript showing the completion of associate degree nursing education or RN diploma education.*[①] *In addition, we require a copy of your active, current unencumbered U.S. RN license with an expiration date. In most cases, we are able to verify your license online but if we cannot do that we will contact you and request that you submit it to us.* NOTE: MRN applicants must submit a completed MS Capstone Requirement form (www.excelsior.edu/capstone).

① Your associate nursing or RN diploma education must be earned from a New York State (NYSED) approved program or a program with specialty accreditation or a regionally accredited college.

Graduate Degree Candidates: Special Instructions and Admission Requirements

Note: Admission to the graduate program requires a bachelor's degree in nursing from a regionally accredited college or university or the foreign equivalent. Applicants with a bachelor's degree in another field and an active and unencumbered RN license should apply to the RN to MS program.

If you have any questions as you complete this application, contact the Admissions Office at 888-647-2388, ext. 2, 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 transcript from a regionally accredited college or university or the foreign equivalent confirming completion of a Bachelor of Science in Nursing

☐ Photocopy of **unencumbered** RN license or a letter from your state board of nursing confirming your active and current registration

☐ A completed MS Capstone Requirement form (www.excelsior.edu/capstone)

International students must demonstrate that they have an equivalent U.S. Registered Nurse (RN) licensure to apply to the Master of Science in Nursing program.

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/Payment Instructions

Please include your $50 non-refundable application fee with this application. Make your check or money order payable to Excelsior College in U.S. dollars drawn on a U.S. bank, or complete the charge card authorization below. Do not send cash.

Note: The $50 application fee is waived for veterans, as well as academic and corporate partners. Military servicemembers and military family members are only required to apply and pay the $50 application fee for programs in the School of Nursing.

☐ Check enclosed   ☐ Money order enclosed

Credit card authorization

I authorize Excelsior College to charge _____ (or the current fee at the time this form is received by Excelsior College) to my:

☐ Mastercard   ☐ Visa   ☐ Discover   ☐ American Express

_____   _____

Credit card account number   Expiration date

_____   _____

Name of cardholder   Signature

| Mail or fax your completed application and payment to: |
| Excelsior College Bursar's Office |
| 7 Columbia Circle, Albany, NY 12203-5159 |
| FAX: 518-464-8700 |

ENROLLMENT AGREEMENT

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

Student Name _____   Date _____

Degree _____

The degree listed on this form must be the same degree selected during the application process.

Refer to the fee schedules (available on our website at www.excelsior.edu/publications) for detailed information on our enrollment options and payment plans. If you have questions regarding current fees or enrollment options, contact our Admissions Office toll-free at 888-647-2388. Questions regarding payment plans should be directed to the Student Accounting Office (888-647-2388, ext. 3).

A. Undergraduate Student Enrollment Options

Indicate the option of your choice. Payment can be made in full or through one of our convenient payment plans. The options are available to all undergraduate candidates for any Excelsior College degree.

☐ **Excelsior Course Option**
There is no fee for students who agree to complete a minimum of 12 Excelsior College course credits (6 course credits for Associate in Applied Science in Technical Studies or Administrative/Management Studies) during their term of enrollment. For military and military family students who agree to complete a minimum of 9 Excelsior College course credits for associate degrees and 15 Excelsior College course credits for bachelor's degrees during their term of enrollment, there is no fee.

☐ **Multi-Source Option**
Students pay the full multi-source fee of $1,095. Military servicemembers, veterans, and military family members pay $760 [1].
Note: Do not choose this option if you are enrolling in the BS Completion Program for RNs or the RN to MS in nursing (with specialization).

   ☐ Payment in full is attached.

   ☐ Pay Your Way Payment Plan [2]. Choose from a minimum of two to a maximum of six monthly payments. Download, print, and complete your Enrollment Payment Plan Agreement Form at www.excelsior.edu/undergraduate-nbs-application (login required).

B. Graduate Student Enrollment Options

Graduate students are required to pay the Graduate Student Services Fee of $265. This fee is paid annually, on the anniversary of your enrollment.

Payment plans are not available for the Graduate Student Services Fee.

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[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.

[2] This payment plan offers a minimum of two to a maximum of six monthly payments. If you choose the payment plan, you must include the first payment with this Enrollment Agreement and complete the Nelnet Business Solutions Automatic Payment Agreement Form to authorize future payments. Both forms must be signed and submitted to Excelsior College.

Include appropriate payment. Payment is made in full or by payment plan agreement. If using a payment plan, include the first payment as outlined in your selected plan. Make your check or money order payable to Excelsior College in U.S. dollars drawn on a U.S. bank, or complete the charge card authorization below. Do not send cash. This fee is nonrefundable. All fees are subject to change without notice.

Credit Card Authorization

I authorize Excelsior College to charge (or the current fee at the time this form is received by Excelsior College) to my:

☐ MasterCard   ☐ Visa   ☐ American Express   ☐ Discover

_____   _____
Credit card account number   Expiration date

_____
Name of cardholder (print)

_____
Signature

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 Excelsior College, I must engage in credit-bearing activity within six months of submission of this Enrollment Agreement. Credit-bearing activity at Excelsior College includes registering for an Excelsior course or exam and/or transferring in new credit (this must be credit that does not appear on the initial evaluation). Failure to engage in credit-bearing activity within six months will result in the expiration of my admission status, at which point I would be required to re-apply. I have also read and understand the multi-source fee refund policy included in the tuition and fee schedules and have read and understand the requirements for the enrollment option I selected as listed in the payment options section of this form.

_____   _____
Signature   Date

ADM 17-64328 rev. 2/2017

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.

▷ Mail to the Office of Registration and Records, Excelsior College, 7 Columbia Circle, Albany, NY 12203-5159.

We will not accept this form via fax or email.

_____   _____   _____
Name (first, last)   Last 4 digits of SSN   Student ID Number

Type of valid, government-issued, photo identification viewed by **Notary or Excelsior College employee:**

☐ Driver's License (or other state-issued photo ID)

☐ Passport

☐ Military DoD

☐ Other (valid, government-issued photo ID) _____

You are required to provide a copy of the ID viewed along with this notarized form.

Student (must sign)

I attest that I am the above named person.

_____   _____
Signature   Date

Notary identification verification

_____   _____
State of   County of

I hereby certify that on this _____ day of _____ , 20 ____ personally appeared before me the signer and subject of the above form, who signed or attested to the same in my presence and presented the above valid form of identification as proof of his or her identity:

_____   _____
Notary Public (Print name)   Commission expiry date

_____
Notary Public Signature

EXCELSIOR COLLEGE STAFF USE

I attest that I, _____ have viewed the above photo identification
and verify the identity of _____ for the purposes of attending Excelsior College.

_____   _____
Excelsior College employee signature   Date