

You can apply using the Common Application or online at uml.edu/apply

University of Massachusetts Lowell Application for Undergraduate Admissions

Please type or print application. Complete all pages and return with your application fee to the Office of Undergraduate Admissions.

Date of Application _____
month / day / year

Application fee: \$60

1 Biographical Information

Name _____
Last/Family First Middle Previous Name/s (if applicable)

Preferred Name _____

Gender M F Date of Birth ____ / ____ / ____
month day year

Social Security # or Individual Taxpayer Identification _____

US Federal Law requires that we request your Social Security Number (SSN) or Taxpayer Identification Number (ITIN) so that it may be included on an information return (1098-T). The 1098-T is used to determine your eligibility for federal education tax credits when filling a federal income tax return. If you do not have your SSN or ITIN number readily available, you may use form W-9S to provide this information to us.

Citizenship I am a citizen of the United States or one of its territories.
 I am a permanent resident of the U.S., holding an alien registration card.
 I am an international applicant.

Alien Registration Number _____ Date Issued _____ Date Expired _____

(Enclose copies of both sides of Alien Registration Card.)

International Student F Visa J Visa Other: _____
 Country of Citizenship: _____

Optional: Ethnicity

1) Are you Hispanic or Latino? Yes, I am Hispanic or Latino No, I am not Hispanic or Latino
2) Please check one or more of the following groups in which you identify yourself as a member?
 Asian White Native Hawaiian or Other Pacific Islander Black or African American
 American Indian or Alaskan Native Multiracial Other

Military Status No Yes, please check one of the boxes below
 Currently Serving on active duty, U.S. Military, U.S. Reserves or National Guard
Branch _____ Start date (month/year) _____ End Date (month/year) _____
 Previously Served, Veteran of U.S. armed forces, U.S. Reserves or National Guard
Branch _____ Start date (month/year) _____ End Date (month/year) _____
 Current Dependent

2 Contact Information

Permanent address _____
street city state country of citizenship zip+4 digits
(International Students should list foreign address here.)

Mailing address _____
(If different) street city state country of citizenship zip+4 digits

Home phone: (_____) _____ Mobile phone: (_____) _____

Email address _____

Parent email address _____

3 Enrollment Plans

When do you wish to enroll? September _____ year January _____ year

4 Intended Major

Please choose your major. Be as specific as possible, including major and concentration if applicable. For example: "Music, Music Performance, Voice" and "Biology, Bioinformatics"

1st choice _____ 2nd choice _____

You will find a list of our majors at uml.edu/Academics/undergraduate-programs

5 Admission Type

- First-year, Non-Traditional First-year, Mass Transfer, Transfer, UMass Intercampus Transfer

- Non-Matriculating, Visiting (matriculated at another college), Visiting (has obtained a bachelor's degree)

6 Academic History

Secondary School Information

Table with 4 columns: High School(s) Attended, City/State, Dates of Attendance, Graduation Year

Name of Guidance Counselor: Phone No:

CEEB Number of Most Recent High School: Guidance email:

Check here if you have a GED: (GED applicants must submit high school transcripts.)

College Information:

Transfer College Report: A Transfer College Report must be completed for all colleges or universities you have attended.

(Transfer students must list all previous college enrollments, whether or not transfer credit is desired. Please list chronologically, beginning with current or most recently attended.)

Table with 6 columns: College/University, City/State, # of Credits, Beginning Date, Ending Date, Degree Earned

7 Test Option and Dates Please circle SAT or ACT and enter the date(s) of test(s). (First-year applicants only.)

No Test Option

Required for the No Test Option:

Please select three questions below to answer, your response should be no more than 200 words.

- 1. Education happens inside and outside the classroom. Describe how an activity or community you are involved in...
2. Describe an instance in your academic career where you have successfully engaged with support services...
3. What specific characteristics make a leader effective? Please share with us how you are a leader in your home, school, or community.
4. What is it about UMass Lowell that compelled you to apply for admission and how do you see yourself being a contributing member to our campus community?
5. Overcoming hardship can build strength of character, resilience, and self-confidence. Please describe an instance in your personal life where you have overcome some adversity and how that experience has instilled these qualities in you.
6. Describe your experience, motivation, or character traits that will allow you to be a successful student at UMass Lowell.

SAT / ACT Date of Test Month / Year

TOEFL (Test of English as a Foreign Language) Date of Test Month / Year

ELPT (English Language Placement Test) Date of Test Month / Year

8 Supporting Materials REQUIRED FOR FIRST-YEAR APPLICANTS

Letter of Recommendation

One letter of recommendation is required for first-year applicants. This is not required for transfers. You should ask someone who is familiar with your abilities and experience (such as a teacher, guidance counselor, coach, employer, etc.) to complete the form at the end of this booklet. The letter of recommendation should be sent to the Office of Undergraduate Admissions along with your application.

Essay

On a separate sheet of paper, prepare a one-to-two page essay (about 500 words) answering one of the following questions:

1. What do you do in your spare time?
2. In your opinion, what is the greatest challenge your generation will face? What ideas do you have for dealing with this issue?
3. If you had to formulate the perfect admissions essay question, what would it be and how would you answer it?
4. Topic of your choice

9 Background Information Required

a. Have you ever been found responsible for a disciplinary violation at an educational institution you have attended from 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal, or expulsion for the institution? ___Yes ___No

b. Have you ever been convicted of a felony or other crime? ___Yes ___No

(Note: You are not required to answer "yes" to the criminal history question if the criminal adjudication or conviction: (1) has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential; (2) was a first conviction for misdemeanor drunkenness, simple assault, speeding, minor traffic violations, or disturbance of the peace; or (3) any conviction of a misdemeanor where the conviction occurred more than five years prior to the date of this application, unless you were sentenced to imprisonment upon conviction of the misdemeanor, or you have been convicted of another criminal offense within the five-year period.)

If you answered "yes" to either or both questions, please submit a separate sheet that gives the approximate date of each incident and explains the circumstances. Mail this directly to the Director of Admissions at the Office of Undergraduate Admissions and mark the envelope CONFIDENTIAL. We will carefully review the circumstances surrounding your situation. A "yes" answer does NOT necessarily disqualify you for consideration for admission to the University of Massachusetts.

10 General Information (None of your answers in this section will affect your admission decision.)

a. Are you interested in living in a campus residence hall? ___Yes ___No

b. Has either of your parents earned an:

Associate's degree	Yes___	No___	Year___	Institution___
Bachelor's degree	Yes___	No___	Year___	Institution___
Master's degree	Yes___	No___	Year___	Institution___
Doctoral degree	Yes___	No___	Year___	Institution___

c. Are there any circumstances you would like us to know about as we review your application? For example, these might include economic, educational, family-related, environmental or health-related challenges you have had to overcome. Yes___ No___

If yes, please explain the special circumstance and submit a separate piece of paper.

11 Tuition Residency Statement

Please read about Tuition Classification at uml.edu/residency.

Concealment of facts or untruthful statements may cause you to be subject to denial of admission and/or dismissal from the University of Massachusetts Lowell.

All applicants must complete and sign (under penalties of perjury) the appropriate section.

Residency:

I am at least 18 years of age and have continuously resided in MA for the 12 consecutive months prior to the start of enrollment.

or

I am under age 18 and my parent/guardian has continuously resided in MA for the 12 consecutive months prior to the start of enrollment.

or

My spouse has continuously resided in MA for the 12 consecutive months prior to the start of enrollment.

I am not a Massachusetts resident.

12 Signature

The University of Massachusetts Lowell reserves the right to withdraw without notice any application not completed and received by the deadline. All materials submitted become the property of the University.

- I certify that all information submitted in the admission process—including this application and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the university and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree should the information I have certified be false.*

I acknowledge that the fee associated with this application is a non-refundable payment.

- I agree to notify the university should there be any change to the information requested in this application, including disciplinary history.
- I understand that once my application has been submitted it may not be altered in any way; I will need to contact the university directly if I wish to provide additional information.
- I acknowledge that I have reviewed the application instructions for the university receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.*

Print Name _____ Signature of applicant _____ Date _____

Parent's/Legal Guardian's Signature* _____ Date _____

*Signature is required for applicants under the age of 18 years.

Recommendation Form

Applicant will complete the top section of this form. Give all copies to referee. This form becomes the property of the University of Massachusetts Lowell.

Name of Applicant _____ Date _____
Last First Middle

Proposed Undergraduate Major _____

Under the provisions of the Family Educational Rights & Privacy Act of 1974, I waive my right of access to this letter of recommendation. The University of Massachusetts Lowell may consider it confidential.

Signature of Applicant (optional) _____

If student has signed the above waiver, we assure the referee that this form will be held in strictest confidence. Please comment on the applicant's character and ability to carry on undergraduate study. Compare the applicant to other students you have known. You may write a separate letter (attach it to this form). **Please put the completed form into an envelope, seal it, sign it and return it directly to the applicant or the university.**

I WOULD WOULD NOT RECOMMEND THE CANDIDATE WITH WITHOUT RESERVATION.

Characteristic	Top 1 or 2 %	Upper 10% but not top 1 or 2%	Upper 25% but not upper 10%	Upper half, but not upper 25%	Lower half	No basis for judgement
Oral Expression						
Emotional Maturity						
Scholastic Ability						
Imagination & Probable Creativity						
Perseverance						
Potential for success in baccalaureate program						

Name _____ Signature _____
Please Print or Type Please Sign Here

Institution _____ Position _____

Phone _____

Email address _____ Website (if any) _____

Street _____

City _____ State _____ Zip _____

