

2017-2018 APPLICATION FORM GRADUATE

ADMISSION TO THE CALIFORNIA STATE UNIVERSITY



Apply online at www.csumentor.edu



Attach \$55 (U.S.) application fee payable to The California State University and send it to the admission office of the campus where you are applying (see campus address on the last page). The fee is non-refundable and may not be transferred to another term. Please print responses in black ink. Response to each item is mandatory unless otherwise indicated. Please read important information at www.calstate.edu/apply before filling out this form.

Section A (Enrollment/Application Information)

(Do not send this form to the Chancellor's Office.)

1. This is an application for admission to

Name of Campus (Submit this application to the CSU campus indicated above.)

- Main Campus
Off-Campus Center

Check one term only

- Summer Quarter or Semester 2017
Fall Quarter or Semester 2017
Winter Quarter (or term) January 2018
Spring Quarter or Semester 2018

2. If you have previously applied to or attended this campus, please list:

Term of Application (Term, Year) Last Term Attended (Term, Year)

3. Legal Name

Last Name Suffix (e.g., Jr., Sr.)

First Name Middle Name

4. Other Name(s) that may appear on your academic records

Last Name First Name Middle Name

5. Current Mailing Address

Street Number Street Name Apartment City State/Province Zip Code

Country, if not USA

International Postal Code

6. Permanent Address (if different from current as indicated above)

Street Number Street Name Apartment City State Zip Code

7. Permanent Residence (if you live in California, list county of residence)

County of residence

If you live outside of California, list other U.S. state or territory.

State of residence

OR Country of residence:

Country of residence

8. Primary Telephone

Area Code Number

9. Cell Phone

Area Code Number

10. Fax Number

Area Code Number

11. E-mail

E-mail address

(E-mail is a primary means of communication with applicants. CSU campuses will send important messages to you using the e-mail address that you list on this application. It is your responsibility to check this e-mail account regularly and read your messages from the CSU. Be sure to notify the campus(es) if this e-mail address changes.)

Section B (Personal/Applicant Information)

12. **Birthdate**

M	M	D	D	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Month Day Year

13. **Social Security Number**

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(Your Social Security Number [SSN] is used internally for Federal reporting purposes. No public usage of SSN is permitted.)

Please refer to the section at the end of this PDF application for more information regarding SSN and Deferred Action for Childhood Arrivals (DACA).

14. **Country of Citizenship** *(All must answer)*

15. **Citizenship** *(Select one of the codes below and enter in box. All must answer.)*

Y – U.S. Citizen **R** – Refugee/Asylee **F** – F Visa (student) **J** – J Visa **N** – None of the above

I – Immigrant I-551 (“green card”) Date Issued

M	M	D	D	Y	Y	Y	Y
---	---	---	---	---	---	---	---

(Provide the date issued and be prepared to submit verification.)
Month Day Year

O – Other Visa (specify)

--	--	--	--	--	--	--	--

 Date Issued

M	M	D	D	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Month Day Year

16. **If you were born outside the U.S., what year did you or will you move to the U.S.?**

Y	Y	Y	Y
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Year

Section C (California State Residency Information)

Your responses to the following questions are required to make a preliminary assessment of your residency status for admission and tuition purposes. The campus may request additional information prior to making a final residency determination.

17. **What U.S. state do you regard as your permanent home?**

--	--

18. **Do you claim California residency?** Yes No

19. **Have you lived in California continuously since birth?** Yes No

If No, when did your present stay in California begin?

M	M	D	D	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Month Day Year

20. **If you currently live in California, but you have lived outside of California in the past, list any places you have lived before your present stay in California began.**

From Date	To Date	U.S. State/Territory or Country of Residence	Parent's Residence
M M Y Y Y Y	M M Y Y Y Y		
M M Y Y Y Y	M M Y Y Y Y		

21. **Place of Birth:** City U.S. State/Territory
 Country

22. **Have you attended high school in California for three or more years?** Yes No

23. **Have you graduated from California high school or have attained a High School Equivalency Certificate issued by the California State GED Office or a Certificate of Proficiency, resulting from the California High School Proficiency Examination?**
 Yes No

Section D (Demographic Information)

To conform with the new guidelines of the U.S. Federal Office of Management and Budget (<http://www.whitehouse.gov/omb>), the California State University must collect from applicants detailed information about their ethnic and racial backgrounds.

If you select "Yes" in Question 24a, a response to Question 24b is required. Please do not select more than one response in Question 24b as only ONE response is allowed. If you have selected "No" or "Decline to State," do not answer Question 24b.

Ethnicity

24a. **In regard to your ethnicity, do you consider yourself Hispanic or Latino?** Yes No Decline to State
 (If "No" or "Decline to State," please go to Question 26.)

24b. **If you indicated Yes on Question 25a (above), please select the ONE category below that best describes your background.**
 (Do not select more than one.)

- | | |
|---|---|
| <input type="checkbox"/> Argentinean | <input type="checkbox"/> Panamanian |
| <input type="checkbox"/> Bolivian | <input type="checkbox"/> Paraguayan |
| <input type="checkbox"/> Chilean | <input type="checkbox"/> Peruvian |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Puerto Rican |
| <input type="checkbox"/> Costa Rican | <input type="checkbox"/> Salvadorian |
| <input type="checkbox"/> Cuban | <input type="checkbox"/> Spaniard |
| <input type="checkbox"/> Dominican (Republic) | <input type="checkbox"/> Uruguayan |
| <input type="checkbox"/> Ecuadorian | <input type="checkbox"/> Venezuelan |
| <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Other Central American |
| <input type="checkbox"/> Honduran | <input type="checkbox"/> Other South American |
| <input type="checkbox"/> Mexican | <input type="checkbox"/> Other Hispanic or Latino _____ |
| <input type="checkbox"/> Nicaraguan | <i>Please specify</i> |

25. **Race**

(All graduate applicants must respond to Question 26.)

The U.S. Census identifies the following races: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Pacific Islander. These racial categories, as well as many sub-categories, are listed below. Mark one or as many races below as appropriate for you. You may mark as many race categories as are appropriate to you. Please mark only one sub-category for each race category that you select. If you select "Decline to State," then you cannot choose any other boxes.

WHITE
 (Please select the ONE sub-category that best describes your background.)

European

Middle Easterner

North African

Other White _____
Please specify

BLACK or AFRICAN AMERICAN
 (Please select the ONE sub-category that best describes your background.)

African American

Black

Haitian

Other African/Black _____
Please specify

AMERICAN INDIAN or ALASKA NATIVE

(Please select the ONE sub-category that best describes your background.)

- Achomawi/Achumawi
- Cahto (e.g., Cahto Indian Tribe of the Laytonville)
- Cahuilla (e.g., Agua Caliente Band of Cahuilla Indians)
- Chemehuevi (e.g., Chemehuevi Indian Tribe of the Chemehuevi Reservation, California)
- Chumash (e.g., Santa Ynez Band of Chumash Mission)
- Costanoan/Ohlone
- Cupeno (e.g., Los Coyotes Band of Cahuilla & Cupeno)
- Gabrielino/Tongva
- Hupa/Hoopa (e.g., Hoopa Valley Tribe, California)
- Karuk (e.g., Karuk Tribe of California)
- Kumeyaay (e.g., Ewiiapaayp Band of Kumeyaay)
- Luiseno (e.g., La Jolla Band of Luiseno Mission)
- Maidu (e.g., Enterprise Rancheria of Maidu Indians)
- Miwok (e.g., Lone Band of Miwok Indians)
- Mojave (e.g., Fort Mojave Indian Tribe of Arizona)
- Ohlone
- Paiute (e.g., Fort Independence Indian Community of Paiute Indians of the Fort)
- Pomo (e.g., Coyote Valley Band of Pomo Indians)
- Quechan (e.g., Quechan Tribe of the Fort Yuma Indians)
- Serrano (e.g., San Manuel Band of Serrano Mission)
- Shoshone (e.g., Paiute-Shoshone Indians of the Bishop Community of the Bishop Colony)
- Tolowa
- Wappo
- Washoe
- Western Mono (e.g., Big Sandy Rancheria of Mono Indians)
- Wintun (e.g., Cachil DeHe Band of Wintun Indians of the Colusa Indian Community)
- Wiyot (e.g., Wiyot Tribe, California/formerly the Table Bluff Reservation - Wiyot Tribe)
- Yokuts
- Yuki
- Yurok (e.g., Yurok Tribe of the Yurok Reservation)
- Latin American Indian

Other American Indian Tribes _____
Please specify

Other Alaska Native Tribes _____
Please specify

ASIAN

(Please select the ONE sub-category that best describes your background.)

- | | | | | | |
|---------------------------------------|---|---------------------------------------|------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Cambodian | <input type="checkbox"/> Indo Chinese | <input type="checkbox"/> Korean | <input type="checkbox"/> Nepalese | <input type="checkbox"/> Sri Lankan |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Chinese (except Taiwanese) | <input type="checkbox"/> Indonesian | <input type="checkbox"/> Laotian | <input type="checkbox"/> Okinawan | <input type="checkbox"/> Taiwanese |
| <input type="checkbox"/> Bhutanese | <input type="checkbox"/> Filipino | <input type="checkbox"/> Iwo Jiman | <input type="checkbox"/> Malaysian | <input type="checkbox"/> Pakistani | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Burmese | <input type="checkbox"/> Hmong | <input type="checkbox"/> Japanese | <input type="checkbox"/> Maldivian | <input type="checkbox"/> Singaporean | <input type="checkbox"/> Vietnamese |

Other Asian _____
Please specify

NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER

(Please select the ONE sub-category that best describes your background.)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Carolinian | <input type="checkbox"/> Kosraean | <input type="checkbox"/> Papua New Guinean | <input type="checkbox"/> Tokelauan |
| <input type="checkbox"/> Chuukese | <input type="checkbox"/> Mariana Islander | <input type="checkbox"/> Pohnpeian | <input type="checkbox"/> Tongan |
| <input type="checkbox"/> Fijian | <input type="checkbox"/> Marshallese | <input type="checkbox"/> Saipanese | <input type="checkbox"/> Yapese |
| <input type="checkbox"/> Guamanian or Chomorro | <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Samoan | <input type="checkbox"/> Other Melanesian |
| <input type="checkbox"/> I-Kiribati | <input type="checkbox"/> Ni-Vanuatu | <input type="checkbox"/> Solomon Islander | <input type="checkbox"/> Other Micronesian |
| | <input type="checkbox"/> Palauan | <input type="checkbox"/> Tahitian | <input type="checkbox"/> Other Polynesian |

Other Pacific Islander _____
Please specify

DECLINE TO STATE NONE OF THE ABOVE

26. If the California State University is asked to report only ONE summary race/ethnicity description for you, please choose the ONE category below that you want us to report.

(All applicants must respond to Question 23. Please check only ONE box.)

- | | |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Two or more races/ethnicities |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Decline to State |

27. Legal Sex (Enter M or F)

Please refer to the end of this PDF application for more information regarding laws pertaining to our questions about legal sex, sexual orientation, gender identity and gender expression.

28. Do you consider yourself to be? (Optional)

- Lesbian Gay Bisexual Queer Heterosexual or straight
- Pansexual Asexual Not Sure Decline to State
- Another orientation _____
Please specify

29a. How do you describe yourself (Please select one answer)?

- Woman Man Trans Woman Trans Man Genderqueer/Gender non-conforming
- Not Sure Decline to state Another identity _____
Please specify

29b. How do you describe the way you express your gender identity in terms of behavior, appearance, speech, and movement? (Please select one answer)?

- Gender conforming Gender non-conforming Both Not Sure Decline to state
- Not Listed Above _____
Please specify

Section E (Military Information)

30. **Have you ever served in the U.S. Military? If YES, please choose your CURRENT status:**

- No Yes, Active Duty Yes, National Guardsman Yes, Reservist Yes, Veteran

(If you are or were a member of the U.S. military, submit a copy of your Joint Services Transcript or your Community College of the Air Force transcript for evaluation by the campus admission office.)

Please indicate the branch of service for your above stated military status:

- Army Navy Air Force Marines Coast Guard

31. **Are you the dependent of a U.S. military servicemember,** including active duty, National Guard, Reserves, or a Veteran discharged from military service?

- No Active Duty National Guard Reserves Veteran

Please refer to the end of this PDF application for more information regarding laws pertaining to U.S. Military and Veteran status, GI Bill, and resident/non-resident status.

Section F (Family Education, Income, and Size Information)

32. **Total Annual Family Income and Family Size** (optional). Under federal regulations, you are considered a dependent student if you are under 24 years unless you are a graduate student, are married or have dependents other than a spouse, are an orphan/ward of the court, or are a veteran or active duty member of the U.S. armed services.

Independent Students: Estimate the total annual income for you (and your spouse if married) and enter in box; and indicate your family size including yourself, spouse, and other dependents.

2015 Total Annual Income (Enter in box.) \$ Family Size
 Number of dependent children living with you in 2015

33. **What are your parents' or guardians' highest levels of formal education? (optional)**

Enter code in box for: Parent/Guardian #1 and Parent/Guardian #2

- 1 – No High School 3 – High School Graduate 5 – 2-Year College Graduate 7 – Postgraduate
 2 – Some High School 4 – Some College 6 – 4-Year College Graduate

Section G (Degree Objective/Teacher Credential Information)

34. **What is your degree objective?** Enter appropriate code in box:

- 0 – None 2 – BA 3 – BS 5 – MA 6 – MS 7 – Other master's (MBA, MFA, MPA, etc.)
 8 – Doctoral degree 9 – Other (specify) _____ (For major code, go to www.calstate.edu/degrees.)

35. **Specify master's/doctoral/major/program objective for which you are applying** _____ Code
 Indicate any option, emphasis, or concentration within this field _____

36. **Teacher or Other Education Credential Objective** (May be in addition to major/program objective)

Enter appropriate code in box:

- N** – Not interested in a credential program **V** – Already hold a California Education credential and seek to earn an additional credential
X – Planning to apply to a credential program at a later time
Y – Planning to apply to a credential program for this term

Credential Objective Name _____ Credential Code (go to www.calstate.edu/degrees.)

37. **No degree or credential objective: courses for personal or professional growth.** (Please list the graduate-level courses you wish to take.)

38. **Do you have an RN (registered nurse) license prior to enrollment at CSU?** Yes No

If you are currently studying for and expect to earn the RN before enrolling at CSU, please answer "Yes" to this question and list your license number as "0". If Yes and registered nurse, please provide RN License Number. _____

Section H (College Attendance)

39. **Print the names and locations of all colleges and universities attended**, even if no course work was completed. Begin with the last institution attended. Attach a separate sheet if you need more space. In units completed, exclude work in progress or planned. **For units in progress, see item 40.**

All Institutions														
College/University Name	State	Enrolled				Number of Units Completed		Degree Received	Year Degree To Be Received			Fee Status Resident Non-Res*		
		From		To		Sem. Units	Qtr. Units		20	14	R			
		Mo.	Yr.	Mo.	Yr.									
A N Y C O L L E G E	C A	0	8	0	7	0	6	4						

*Attach evidence of nonresident status. (e.g., receipt for payment of nonresident tuition)

40. **List below college courses** in which you are currently enrolled and courses you plan to complete (including summer school) before entering the CSU. Attach a separate sheet if more space is needed.

Courses in Progress/Planned																								
Name and Location of Institution						Term and Year (FA/WT/SP/SU)			Department Course Number and Title						Unit Value									
A	N	Y				F	A	2	0	1	4	E	N	G	L	1	A	C	O	M	P			3
								Y	Y	Y	Y													
								Y	Y	Y	Y													
								Y	Y	Y	Y													
								Y	Y	Y	Y													
								Y	Y	Y	Y													
												Total Units in Progress or Planned												

Section I (Certification)

41. **CERTIFICATION** — to be read and signed by all applicants to certify the accuracy of the information provided.

I certify under penalty of perjury under the laws of the State of California that I have provided complete and accurate responses to all the items on this application. I further certify that all official documents submitted in support of this application are authentic and unaltered records that pertain to me. I authorize the California State University to release any information submitted by me in this application for admission and any application for financial aid to any person, firm, corporation, association, or government agency to verify or explain the information I have provided or to obtain other information necessary for my application for admission and any application for administration of financial aid and in connection with any perjury proceedings. My signature certifies the accuracy and completeness of the information provided. I understand that any misrepresentation or omission may be cause for denial or cancellation of admission, transfer credit, or enrollment. I certify that so long as I am a student at this institution, I will advise the residence clerk if there is a change in any of the facts affecting my residence.

Signed at

--	--	--

City and County

Applicant's Signature

Date

When claiming California residence and completing this form outside California, it must be subscribed and sworn to before a person authorized to administer oaths, such as a notary public.

Tuition Fee Refund Policy — Tuition Fees may be refunded only as authorized by Section 41802 of Title 5, California Code of Regulations. Details concerning the fees that may be refunded, the circumstances under which they may be refunded, and the appropriate procedure to be followed in seeking a refund may be obtained from the office of admission and records on each campus.

Use of the Social Security Number—

If you do not have a Social Security Number at the time you file the application, you may leave the item blank and the campus will assign a temporary number. However, you should obtain a Social Security Number, unless you are prohibited by law from doing so, and submit it to the university by the time you begin enrollment. Failure to furnish your correct Social Security Number may result in the imposition of a penalty by the Internal Revenue Service.

You are required to include your Social Security Number (or taxpayer identification number) on admission application forms to all CSU campuses pursuant to Section 41201, Title 5, California Code of Regulations. CSU campuses use the Social Security Number to identify your student records maintained in connection with your association with the campus and, if needed, to help collect debts owed the university. Your Social Security Number may be written on your application fee check to facilitate the processing of your fee payment. Also, the Internal Revenue Service requires the university to file information that includes the student's Social Security Number and other information, such as the amount paid for qualified tuition, related expenses, and interest on educational loans. That information is used to help determine whether you, or a person claiming you as a dependent, may take a credit or deduction to reduce federal income taxes.

FOR OFFICE USE ONLY:

Received	<input type="text"/>	
Date	<input type="text"/>	
Fee Status	<input type="text"/>	By _____
Data Entry	<input type="text"/>	By _____
Previous Student File Number	<input type="text"/>	

Part B

Completion of Part B is required; it will be forwarded to the department responsible for the degree or credential sought. The information provided below should support the information provided on Part A.

1. **Specify major/program objective at the time of enrollment (fill in all applicable information).**
 _____ Code
 (To find out the application code for your specific major, please go to: www.calstate.edu/degrees)

2. **Term applying for** (check one term only).
 Summer Quarter/Semester 2017 Fall Quarter/Semester 2017
 Winter Quarter/Term 2018 Spring Quarter/Semester 2018

3. **Legal Name**

4. **Current Mailing Address**

 Street Number Street Name Apartment
 -
 City State/Province Zip Code
 Country (if not USA) International Postal Code

5. **Primary Telephone**
 Area Code Number

6. **Cell Phone**
 Area Code Number

7. **Fax Number**
 Area Code Number

8. **E-mail** _____
 (Some campuses communicate with applicants via e-mail. Please be certain that this is the e-mail address where your correspondence should be sent. It is your responsibility to read your e-mail messages.)

9. **Birthdate**
 10. **Legal Sex** (Enter M or F)

11. **Teacher or Other Education Credential Objective** (May be in addition to major/program objective)
 Enter appropriate code in box:
N – Not interested in a credential program
X – Planning to apply to a credential program at a later time
Y – Planning to apply to a credential program for this term
V – Already hold a California Education credential and seek to earn an additional credential

Credential Objective Name _____ Credential Code

12. **Have you been admitted to a program for the credential you are now seeking?** Yes No
 If "yes," which campus? _____
 (To find out the application code for credential program, please go to www.calstate.edu/degrees.)

13. **Do you hold or have you ever held a valid California teaching credential?** Yes No
 If "yes," please indicate the status of your credential(s) on the line adjacent to the credential title(s).
 (1 – Partial or Preliminary 2 – Clear or Professional 3 – Life 4 – Expired)
 ___ General Elementary ___ Standard Elementary ___ General Secondary ___ Standard Secondary
 ___ Single Subject ___ Multiple Subject ___ Administrative Services ___ Pupil Personnel Services
 ___ Designated Subjects ___ Special Education ___ Specialist Instruction ___ Other

14. **List in chronological order all colleges and universities attended**, including professional schools, regardless of length of attendance, even if no work has been completed.

Name and Location of Institution	Mo./Yr. of Attendance		Major	Estimated Overall GPA	Degree Mo./Yr. (to be) Received
	From	To			

15. **List below the college courses** in which you are currently enrolled and the additional courses you plan to complete before entering, including summer school. Attach a separate sheet if you need more space.

Courses in Progress				Courses Planned			
Institution	Term/Year	Dept. Course No. and Title	Unit Value	Institution	Term/Year	Dept. Course No. and Title	Unit Value

16. **Academic Honors** (scholarships, awards, publications). _____

17. **List your first language.** _____

Indicate your proficiency in other languages in which you have competence. Specify language in first box, then rate your proficiency in reading, writing, and speaking for that language.

Rate yourself: E – Excellent G – Good F – Fair P – Poor

LANGUAGE	READING	WRITING	SPEAKING	LANGUAGE	READING	WRITING	SPEAKING	LANGUAGE	READING	WRITING	SPEAKING
----------	---------	---------	----------	----------	---------	---------	----------	----------	---------	---------	----------

Years of instruction through the medium of English _____

18. **Test Scores.** List below standardized U.S. graduate admissions tests taken/scheduled: GMAT, GRE, MAT, TOEFL, TWE, NTE, CBEST, etc. Official test reports must be sent to the Graduate Admission Office directly from the testing service. Not all CSU programs require test scores.

Test	Date Taken/Scheduled	Scores Received	Date Score Requested
GRE, General		Verbal _____ % Quantitative _____ % Analytical _____ %	
GMAT		Verbal <input type="text"/> <input type="text"/> <input type="text"/> Quantitative <input type="text"/> <input type="text"/> <input type="text"/> Total <input type="text"/> <input type="text"/> <input type="text"/>	
		Analytical Writing <input type="text"/> <input type="text"/> <input type="text"/> Integrated Reason <input type="text"/> <input type="text"/> <input type="text"/>	
Others			

19a. **TOEFL. TOEFL scores** are required of applicants who have not studied full time for at least three years in environments where English is the language of instruction.

Test	Date Taken/Scheduled	Scores Received
TOEFL (paper version)		
TOEFL Internet (iBT) taken September 2005 or later		

19b. **Alternative to TOEFL.** Some campuses will accept official results of the International English Language Testing System (IELTS) or Pearsons Test of English (PTE). Other campuses/programs accept only TOEFL results.

Test	Date Taken/Scheduled	Overall Score
IELTS		
PTE		

20. **List all applicable employment.** Include military service but omit summer and part-time work not relevant to your career or academic goal. Indicate your present employer, if now employed.

Employer	Nature of Work	Inclusive Dates

21. **List below three faculty members who best know your academic qualifications,** including performance, potential, and motivation. If required by the individual program to which you are applying, request that these individuals send letters of reference directly to the department chair or graduate coordinator of the program.

Name	Address	Position and Institution

22. **Statement of Purpose.** Write a brief statement of purpose describing reason(s) for pursuing graduate or postbaccalaureate study. Include any additional information concerning your preparation that is pertinent to the objective specified. Attach an additional sheet if necessary. You may also attach a resumé and/or letters of reference if required by the department.

I certify that the information submitted in this application is true, complete, and accurate. I understand that any misrepresentation will be cause for denial of admission.

Signature _____ Date _____

Information Section

Section B

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Social Security Number (SSN) - If you do not have a Social Security number at the time you file the application, you may leave the item blank and the campus will assign a temporary number. However, you should obtain a Social Security number, unless you are prohibited by law from doing so, and submit it to the university by the time you begin enrollment. Failure to furnish your correct Social Security number may result in the imposition of a penalty by the Internal Revenue Service.

You are required to include your Social Security number on admission application forms to all CSU campuses pursuant to Section 41201, Title 5, Code of California Regulations and Section 6109 of the Internal Revenue Code. CSU campuses may use the Social Security number to identify your student records maintained in your association with the campus and, if needed, to help collect debts owed the university. Also, the Internal Revenue Service requires the university to file information returns that include the student's Social Security number and other information, such as the amount paid for qualified tuition, related expenses, and interest on educational loans. That information is used to help determine whether you, or a person claiming you as a dependent, may take a credit or deduction to reduce federal income taxes. In addition, this information is utilized to match your application to academic records, financial aid applications, and other documents. In addition, this information is utilized to match your application to academic records, financial aid applications, and other documents.

Deferred Action for Childhood Arrivals (DACA) - If you have qualified for Deferred Action for Childhood Arrivals (DACA) from the United States Citizenship and Immigration Services and subsequently been issued a Social Security Number, please enter the number above. If you have qualified for Deferred Action for Childhood Arrivals (DACA) from the United States Citizenship and Immigration Services and subsequently been issued a Social Security Number, please enter the number above.

Section D

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Questions 27, 28, & 29 -

The CSU collects voluntary demographic information regarding the sexual orientation, gender identity, and gender expression of students. (California Education Code section 66027)

- Providing this information is optional and is not required to move forward or to complete the CSU application for admission
- Your responses are kept private and secure. Limited campus staff will have access to this information
- The data will not be used for discriminatory purposes
- This information is used to provide services to all of our student populations
- This information is used for summary demographic reporting where no individual applicant's identity will be revealed. In compliance with the CA Education Code, this summary information will be made available on CSU and campus websites and to the California Legislature

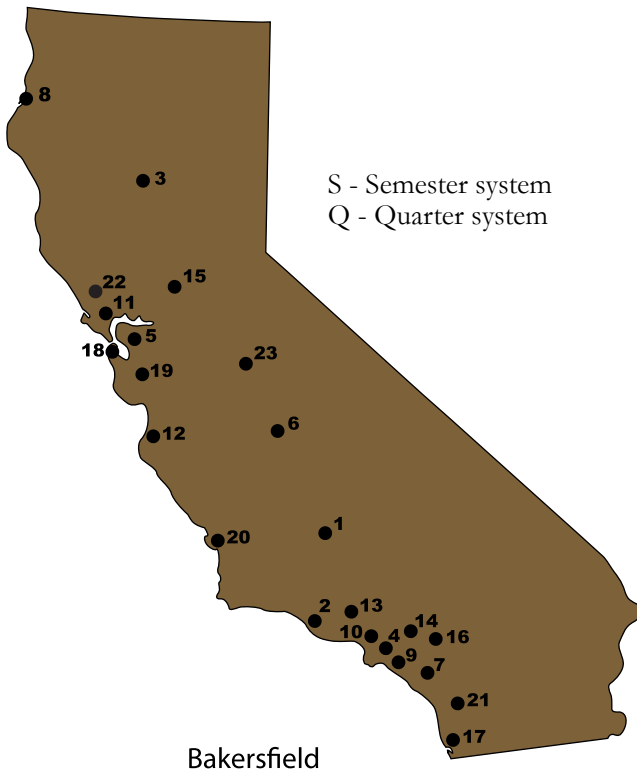
Section E

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Questions 30 & 31 - If you are currently serving or have ever served in U.S. Military, submit a copy of your Joint Services Transcript or your Community College of the Air Force transcript for evaluation by the campus admissions office. If you are a Veteran or the dependent of a veteran who is eligible to receive GI Bill benefits and you believe you are eligible under Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113-146), Section 702 for in-state tuition, please send a copy of your DD 214 and GI Bill Certificate of Eligibility (COE) to the campus Admissions Office to determine your status for a non-resident tuition waiver.

A world of information is just a click away.

Check out the website for the entire California State University: www.csumentor.edu. You will find helpful hints, frequently asked questions, campus tours, and general information about all 23 CSU campuses. The phone number listed for each campus is for the Office of Admission.



- 1** California State University, Bakersfield • Q
9001 Stockdale Highway, Bakersfield, CA 93311-1099
(661) 654-3036 • www.csub.edu
- 2** California State University, Channel Islands • S
One University Drive, Camarillo, CA 93012
(805) 437-8400 • www.csuci.edu
- 3** California State University, Chico • S
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