

RETURNING STUDENT APPLICATION FOR ADMISSION TO GRADUATE SCHOOL

Full legal name _____
(Last) (First) (Middle)

Previous Name(s) _____
(Last) (First) (Middle)

Field of Study: _____ Thesis Publishable Paper Non-Thesis

Semester applicant expects to re-enter Graduate School: Fall _____ Spring _____ Summer _____

Most recent semester attended Montana Tech: Fall _____ Spring _____ Summer _____

Mailing Address _____

City, State, Zip: _____

Telephone # _____ E-Mail _____

Birthdate ____/____/____ Country of Citizenship _____

If not US citizen, permanent resident alien of US? Yes No

Have you attended any college since attending Montana Tech? Yes No

Name of Institution _____ Dates Attended: _____
Transcripts must be sent directly to Montana Tech Graduate School. From (Mo-Yr) To (Mo-Yr)

MONTANA RESIDENCY

Are you claiming Montana residency for fee purposes? Yes No

Year and Month of Permanent Montana State Residency: _____

Full-time employment data for the past two years (*firm, location, dates*):

Firm	Location	Dates

Are you a registered voter? Yes No

Do you have a current Montana driver's license? Yes Expiration Date: _____ No

Do you own a motor vehicle? Yes No

List the last two years it was registered in Montana: 20____ 20____

Did you file state income tax return last year? Yes No State where filed: _____

Please list the year and return mailing address for past two federal income tax returns:

Year: _____ Address: _____ Year: _____ Address: _____

Of what state are you a resident? _____ Date residency began _____

I hereby certify that to the best of my knowledge, the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal.

Applicant's Complete Signature: _____ Date: _____

