



## Former Missouri S&T Student Undergraduate Application for Admission

Missouri University of Science and Technology  
Office of the Registrar

103 Parker Hall  
300 West 13<sup>th</sup> Street  
Rolla, MO 65409-0930  
Phone: (573) 341-4181  
fax: (573) 341-4362  
registrar@mst.edu  
http://registrar.mst.edu/

1. Legal Name in Full  _____			2. Social Security Number  _____ - _____ - _____		
Last	First	Middle			
3. Student ID _____			4. Dates you previously attended Missouri S&T _____		
5. Specify year and term in which you plan to first enroll (check one) Year _____ <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer			6. Do you currently have access to Joe'SS or have an active UM e-mail account (not just Missouri S&T)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
7. For what degree will you be a candidate? <input type="checkbox"/> B.S. <input type="checkbox"/> B.A. <input type="checkbox"/> None					
8. Specify your academic major: _____					
9. Term you expect to complete this degree: Year _____ <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer					
10. Name and location of all colleges attended since leaving Missouri S&T. (If none, enter "NONE"). If currently enrolled indicate in date space.					
Name of College	Location (City & State)	Dates of Attendance	Degrees Earned or Expected with Dates Received or Expected		
1. _____	_____	_____	_____		
2. _____	_____	_____	_____		
3. _____	_____	_____	_____		
11. Your home address : E-mail _____ Phone # _____					
_____	_____	_____	_____	_____	_____
Street address	City	County	State	Zip Code	
12. Current mailing address: (if different from home address) E-mail _____ Phone # _____					
_____	_____	_____	_____	_____	_____
Street address	City	County	State	Zip Code	
<b>Note: No transcript can be accepted directly from the applicant; admission status cannot be determined until complete credentials are on file. Failure to complete all items of this application or giving of misinformation will void your admission.</b>					
Applicant's signature _____			Date of Application: _____		

An Equal Opportunity Institution

Return Completed Form to:

**Missouri University of Science and Technology  
Office of the Registrar  
103 Parker Hall  
300 West 13<sup>th</sup> Street  
Rolla, MO 65409-0930**

**Fax: (573) 341-4362**

## APPLICATION PROCEDURE FOR FORMER STUDENTS RETURNING TO MISSOURI UNIVERSITY OF SCIENCE AND TECHNOLOGY

Applicants must submit the following before consideration is given:

- Application Form
- Transcripts of all credits completed since last attending Missouri S&T



*Jeanne Cleary Disclosure of Campus Security and Campus Crime Statistics Act: The Missouri University of Science and Technology's annual security report includes statistics for the previous three years concerning reported crimes that occurred on campus; in certain off-campus buildings owned or controlled by Missouri S&T; and on public property within the city limits of Rolla, MO. The report also includes institutional policies concerning campus security, such as policies concerning alcohol and drug use, crime prevention, the reporting of crimes, sexual assault and other matters. You can obtain a copy of this report by accessing the following Web site at: <http://police.mst.edu/securityact/> or by contacting one of the following Missouri S&T departments: Admissions Office, 106 Parker Hall, Rolla, MO 65409; Registrar's Office, 103 Parker Hall, Rolla, MO 65409; Human Resources Services, 113 University Center, Rolla, MO 65409; University Police, G10 Campus Support Facility, Rolla, MO 65409. Individuals with disabilities, who require accommodations under the Americans with Disabilities Act, should contact the ADA Coordinator at 573-341-6314.*