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| ***MassTransfer* Application for Admission** |
| **This *free* application is for Massachusetts community college students who will/have completed their associate’s degree under *MassTransfer or an Additional Transfer Agreement (ATA) in an approved program of study, as well as those who will/have completed their associate’s degree under an Education or Nursing Transfer Compact.*** Visit the *MassTransfer* website ([www.mass.edu/masstransfer](http://www.mass.edu/masstransfer)) to learn more about the requirements and benefits of *MassTransfer.* |
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| **Preferred Application Filing Dates\***  * Fall entrance: March 1 * Spring entrance: October 15   \* If you wish to apply after these dates, please check the institutional website as transfer application dates vary by institution and certain programs of study with competitive admission may no longer be available. Applications for financial aid, housing, early registration and/or certain majors may have earlier deadlines than indicated. |
| **To complete this application** *(please type responses or print clearly)*   * Check to see if your major is offered on each institution’s website * Complete all fields of this application and send it via postal mail to your intended institution’s admissions office. (Contact information is on the *MassTransfer* website: [www.mass.edu/masstransfer](http://www.mass.edu/masstransfer).) Incomplete application forms will not be processed or accepted. * Request an official transcript from the Registrar’s Office of your current community college and from all colleges you previously attended (whether or not you wish to transfer credits). Have the transcript(s) sent to your intended state university or University of Massachusetts campus. * Once you graduate from your community college, request a final official transcript with graduation notation from the Registrar’s Office and have it sent to your intended state university or University of Massachusetts campus.   **NOTE:** some campuses may require additional information. |
| **To qualify for the *MassTransfer* Tuition Waiver**  * Complete your associate’s degree in a designated program with a 3.0 final GPA. * Once you graduate from your community college, request a final official transcript with graduation notation from the Registrar’s Office and have it sent to your intended state university or University of Massachusetts campus. * Enroll at a state university or University of Massachusetts campus **within one academic year** after graduating from your community college. * Maintain a 3.0 cumulative GPA, and you will be eligible to receive the tuition waiver for four consecutive semesters at the baccalaureate institution. * Note: Continuing Education, Evening and/or Online programs may not be eligible. * Note: Waiver is a minimum of one-third off the in-state tuition only. Fees are not eligible for the discount. |
| **Financial Aid** Complete and file the Free Application for Federal Student Aid (FAFSA) at [*www.fafsa.ed.gov*](http://www.fafsa.ed.gov)by March 1.  Note: This date is earlier than the date listed on the FAFSA website to ensure that state financial aid is processed in time. Name and social security number on the application must match that on the FAFSA or financial aid may not be processed. |
| *Disclaimer: Students who have matriculated into another college since completing an associate degree are not eligible for MassTransfer and must submit a traditional admission application. Students who are not in good academic, fiscal, and/or disciplinary status at all previously attended colleges and universities who have a criminal history/record may not be guaranteed MassTransfer benefits.* |

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| **STUDENT INFORMATION - PLEASE PRINT LEGIBLY** | | | | | | | | | | | |
| **Name**: |  | |  | | |  | | |  | | |
|  | *Last/Family* | | *First* | | | *Middle* | | | (*Other name that may appear on official records)* | | |
| **Mailing Address**: |  | | | | | | | | | | |
|  | *Street Address (including apartment #, if applicable)* | | | | | | | | | | |
|  |  | | | | |  | | |  | | |
|  | *City* | | | | | *State* | | | *ZIP* | | |
| **Permanent Address**: |  | | | | | | | | | | |
| *(If different from mailing)* | *Street Address (including apartment #, if applicable)* | | | | | | | | | | |
|  |  | | | | |  | | |  | | |
|  | *City* | | | | | *State* | | | *ZIP* | | |
| **Phone/Email:** |  |  | | | |  | | | | | |
|  | *Cell Phone* | *Home Phone* | | | | *Email Address* | | | | | |
| **Date of Birth (\*Required)**: |  | **Social Security #**  ***(Required for financial aid)***: | | | | -    - | | | | | |
| **Gender** | Female  Male | **Veteran?** | | | | Yes  No  On active duty | | | | | |
| **Residency**: | In-State  Out-of-State | | | | | **Country of Birth**: | | | | |  |
| **Citizenship**: | U.S. | | | | | | | | | | |
|  | Permanent Resident: | | Alien Registration #: | | | |  | | | | |
|  |  | | Date Issued: | | | |  | | | | |
|  |  | | *Attach/send copies of both sides of alien registration card* | | | | | | | | |
|  | International Student: | | Visa Type: | | | |  | | | | |
|  |  | | *Note: International students must meet additional visa status and financial support requirements (vary from campus to campus). Failure to meet international admission requirements will negate all benefits of MassTransfer.* | | | | | | | | |
| **Ethnic Information (optional):** | Do you consider yourself Hispanic or Latino? Yes  No | | | | | | | | | | |
|  | Please check one or more:  American Indian or Alaskan Native | | | | Asian | | | | | Black or African American | |
|  | Cape Verdean | | | | Multiracial | | | | | Native Hawaiian or Other Pacific Islander | |
|  | White/Non-Hispanic | | | |  | | | | |  | |
| **INTENDED ENROLLMENT INFORMATION** | | | | | | | | | | | |
| **Intended Enrollment Status**: | Full-time -or-  Part-time | | | | | | | | | | |
|  | Day Program -or-  Continuing Education/Evening/Online Program\* | | | | | | | | | | |
|  | *\*MassTransfer tuition waiver may not be eligible for Continuing Education/Evening/Online program enrollment* | | | | | | | | | | |
| **Planned Entrance**: | September 20      -or-  January 20 | | | | | | | | | | |
| **First Choice of Major:**  **(\*Required)** |  | | | **Second Choice of Major**:  **(\*Required)** | | | |  | | | |
|  |  | | | *\* For education majors.* Date of CLST: | | | | | | | |
| **Intended Housing Type**: | On-Campus (not guaranteed)  Off-campus  Commuter | | | | | | | | | | |

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| **CURRENT ENROLLMENT INFORMATION** | | | | | | | | | | |
| **Current and Previous Colleges Attended** You must supply official college transcripts from **every** school attended whether or not transfer credit is desired or if they are listed on your community college transcript. | | | | | | | | | | |
| *College/University* | | *City/State* | | *Dates Attended (MM-YYYY)* | | | | *Degree Earned* | | |
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|  | |  | | to | | | |  | | |
| **Current Enrollment Status** | | Enrolled  Not Enrolled (skip Current Courses section) | | | | | | | | |
| **Current Courses** | | | | | | | | | | |
| *Course Title Course Number Semester/Year* | | | | | | | | | *# of credits* |  |
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| **Anticipated Summer/Intersession Courses** | | | | | | | | | | |
| *Course Title Course Number Semester/Year* | | | | | | | | | *# of credits* | |
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| **Name of High School Attended:**  **YOG:** | | | | | | | (MM-YYYY) | | | |
| **\*REQUIRED Expected Date of Graduation with Associate’s Degree:** | | | | | | | (MM-YYYY) | | | |
| **Associate’s Degree Major:** | | | | | | |  | | | |
| **OTHER INFORMATION (optional to complete)** | | | | | | | | | | |
| **Financial Aid Plans** Please select the option below that best describes your plans to complete a FAFSA (Free Application for Federal Student Aid). This information will have no impact on admissions. The **Financial Aid priority deadline is March 1. Your name must appear identically on all forms.** | | | | | | | | | | |
| I plan to apply for financial aid and will complete the FAFSA at *www.fafsa.ed.gov* | | | | | | | | | | |
| I do not plan to apply for financial aid at this time | | | | | | | | | | |
| **Family Information** | | | | | | | | | | |
| Have one or more of your parent(s) attended a college/university? | | | | | Yes  No | | | | | |
| Have one or more of your parent(s) received a bachelor’s degree? | | | | | Yes  No | | | | | |
| **DISCLOSURES (all fields are required)** | | | | | | | | | | |
| Have you ever been placed on disciplinary probation, suspension, or refused readmission to any college or university?  Yes  No  *If Yes, you must enclose an explanation on a separate sheet. Note: additional documentation may be required.* | | | Have you ever been convicted of a misdemeanor or felony?  Yes  No  *If Yes, you must enclose an explanation on a separate sheet. Note: additional documentation may be required.* | | | | | | | |
| **TUITION RESIDENCY**  **Please read the Tuition Classification information at:** [*www.mass.edu/forstudents/admissions/residencypolicy.asp*](http://www.mass.edu/forstudents/admissions/residencypolicy.asp)*.*  Please note that possession of a second home in Massachusetts does not qualify you for residency. **All applicants must check appropriate residency status:**    **In-state** (complete Basis/Signature sections below)  **Out-of-state** (complete Signature section below)    **Basis for in-state residency (complete if declaring in-state residency only):**    I am a dependent student and at least one parent /legal guardian has resided in Massachusetts for at least  12 months prior to my planned enrollment at a four-year institution. Please provide Massachusetts parent’s/legal guardian’s information below:    **Name**    **Street address**    **City/State**    **Resided in MA since**       **Daytime phone number**  *(month/year)*    I am an independent student and I will have lived in Massachusetts for at least 12 months prior to my planned enrollment at a four-year institution. (Please note that time spent as a full-time student in Massachusetts may not be applied to the 12-month residency period. Four-year institutions may also require additional documentation when traditional college-age students claim independent status.)    My parent/legal guardian (or self) is a member of the armed forces on active duty in Massachusetts.    **All students must complete the following**: | | | | | | | | | | |
| The institution reserves the right to withdraw without notice any application which is not complete and accurate. By my signature below, I certify that the information I have provided about my academic and personal history and my residency is accurate and complete. **Failure to disclose any required information may result in denial of admission or retroactive administrative withdrawal without refund or loss of course credits.**  I understand that information about the applicant that is submitted will be kept confidential and that, by participating in *MassTransfer*, I consent to the release of my student education records between the community college and the state university or the University of Massachusetts campus at which I intend to enroll or to educational agencies and institutions for research purposes.  I understand that additional forms may be required for admission and that it is my responsibility to thoroughly read correspondence sent from the institution.  I understand that it is my responsibility to contact the community college and any other college/university I previously attended to arrange to have my current and final transcript sent to my intended state university or University of Massachusetts campus. | | | | | | | | | | |
| Signature: |  | | | | Date: |  | | | | |