

CONCURRENT ENROLLMENT ADMISSION APPLICATION

Prairie View A&M University
P. O. Box 3089
Prairie View, TX 77446-3089
936. 857. 2626

Semester and Year of Entry: Fall ____ Spring ____ Summer ____

Social Security Number: _____-_____-_____
(Optional: This will ensure your documents are matched properly)
Date of Birth: ____/____/_____
(Month Day Year)

Student Name: _____
(Last/Family) (First) (Middle) (Suffix*Jr.)

Permanent Address: _____ Apt# _____

City: _____ State/Country: _____ Zip: _____ County: _____

Permanent Phone No. (_____) _____ - _____ Gender: Male Female

E-Mail Address: _____

Parent/Guardian Name: _____ Relationship: _____
(Last) (First)

Address: _____ Apt#: _____
(If different from permanent address) Number & Street

City: _____ State/Country: _____ Zip: _____ County: _____

E-Mail Address: _____

RESIDENCY INFORMATION

Please answer all questions

Are you a U. S. citizen? Yes No If No, what country of citizenship? _____
If you are not a citizen, do you hold Permanent Residence status (valid I-551) for the U.S.?
 Yes No If Yes, date permanent resident card issued: _____ Number: _____

Are you a resident of Texas? Yes No
If No, what state are you resident? State of _____

EDUCATIONAL DATA:

High School Attended: _____
City: _____ State: _____
Grades Attended: 9th 10th 11th 12th Home-Schooled: Yes No
Expected Graduation Date: _____ Month _____ Year
Have you ever attended PVAMU before? Yes No
If Yes, indicate _____ Month _____ Year
Indicate your choice of major: _____

ADMISSION TESTS:

ACT- Date taken or plan to take: _____ Month _____ Year
SAT- Date taken or plan to take: _____ Month _____ Year

TEXAS ACADEMIC SKILLS PROGRAM (TASP)

The TASP test is not used for admission purposes but must be taken prior to enrollment in any college-level course. If you are exempted from taking the TASP test because of qualifying scores, please provide a copy of your test scores. For more information on the TASP Test, please see your high school counselor.

AFFIRMATION

I affirm by my signature that I have furnished all required information to the best of my knowledge. I understand that giving any false information or withholding can lead to the cancellation of any acceptance and enrollment.

Student's Signature: _____ Date: _____

Applications are considered without reference to race, color, national origin, religion, sex or academically non-related handicap.

ETHNIC IDENTIFICATION

Please indicate which of the following groups best describe your ethnic background. This information is voluntary and required to ensure compliance with the Civil Rights Act.

- | | |
|--|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> African American/Black (Non-Hispanic) | <input type="checkbox"/> White (Non-Hispanic) |
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Other |

This application is used for admittance for concurrent enrollment only. If you plan to enroll upon graduation from high school, you must complete and submit a Texas Common Application prior to the due date.