



# COASTAL CAROLINA --- UNIVERSITY

## **Application for Undergraduate Admission**

*Apply online!*

**[coastal.edu/admissions/apply.html](http://coastal.edu/admissions/apply.html)**



Office of Admissions • Coastal Carolina University • P.O. Box 261954 • Conway, South Carolina 29528-6054  
800-277-7000 or 843-349-2170 • admissions@coastal.edu • coastal.edu

**Thank you for your interest in Coastal Carolina University. Once your application is complete (submission of official transcripts and test scores), you should hear from us regarding your application in approximately three weeks. We will make every effort to assist you with the application process.**

- **Application Date for Priority Consideration: December 1**
- **Completed applications received after December 1 will be reviewed on a rolling basis until April 15.**
- **After April 15 applications will be reviewed on a space available basis only.**

## Application Checklist and Instructions

**To ensure your application is processed quickly and accurately, please make sure you:**

1. Submit the \$45 application fee (check or credit card). We prefer that you apply online at [coastal.edu/admissions/apply.html](http://coastal.edu/admissions/apply.html).
2. Complete the Residency Information page if you are an in-state student.
3. Submit official high school transcript(s) and SAT or ACT scores (for all freshmen and transfers with fewer than 24 transferable credit hours).
4. Submit official college transcripts (transfer and second degree applicants are required to submit an official transcript from each institution attended; freshmen are required to submit an official college transcript for all college courses completed in high school).
5. Home schooled applicants must also submit the Declaration of Intent to Home School and a home school high school transcript of all work completed with the certification of completion of course work by the primary teacher.

### ► **Item 1 ABOUT YOU**

- a. Select "Freshman" if you have not attended a regionally accredited college since you graduated from high school.
- b. Select "Transfer" if you have attended any regionally accredited college after high school graduation.
- c. Select "Second Degree" if you have earned a baccalaureate degree and are interested in pursuing a second baccalaureate degree.

### ► **Item 20**

All degree-seeking students must declare a major. Please enter the code provided from the list on the back page of this application.

<b>SAT Test Dates</b> collegeboard.com Code: 5837	<b>ACT Test Dates</b> act.org Code: 3843
---	--

If you are admitted to the University and become a student here, any information on the application may be made public, with the exception of your Social Security Number or Alien Registration number. If you wish to keep the information private, you must advise the University in writing. Forms are available in the Office of the Registrar.

Federal law recognizes the student Social Security Number (SSN) as personally identifiable information under the Family Education Rights and Privacy Act of 1974 (FERPA). However, the law permits Coastal Carolina University to request and use this information in compliance with state and federal guidelines. You are not required to provide an SSN to be considered for admission, but you are strongly encouraged to do so, if you have one. Providing an SSN will assist with matching records to your application, such as transcripts and test scores. NOTE: An SSN is required to apply for financial aid. If you plan to apply for financial aid, you are encouraged to provide your SSN on your admissions application to assist with financial aid processing later. Providing your accurate Social Security Number will also help with citizenship verification.



# Application for Undergraduate Admission

A nonrefundable application fee of \$45 is required with this application.  
**THIS FORM WILL BE SCANNED. PLEASE PRINT IN BLACK INK INSIDE THE LINES.**

1. **ABOUT YOU:**  Freshman     Transfer     Second Degree
2. **TERM OF PROPOSED ENROLLMENT:**  Fall     Spring     Maymester     Summer I     Summer II    YEAR \_\_\_\_\_
3. **SOCIAL SECURITY NUMBER** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Required for U.S. Citizens or Permanent Residents applying for financial aid.)
4. **NAME:** Last name \_\_\_\_\_  
First name \_\_\_\_\_ Middle name \_\_\_\_\_ Suffix (Jr., III, IV) \_\_\_\_\_
5. **MAIDEN OR FORMER NAME USED AT OTHER COLLEGES** \_\_\_\_\_
6. **HOME/PERMANENT ADDRESS**  
P.O. Box, RFD, Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Zip +four \_\_\_\_\_  
County \_\_\_\_\_  
Is your mailing address the same as your permanent address?  Yes     No  
Mailing address if different than home/permanent address above.  
P.O. Box, RFD, Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Zip +four \_\_\_\_\_  
County \_\_\_\_\_
7. **HOME TELEPHONE** ( \_\_\_\_\_ ) \_\_\_\_\_ **CELL TELEPHONE** ( \_\_\_\_\_ ) \_\_\_\_\_  
 I give permission to Coastal Carolina University to send me important updates via text messaging. (Standard message rates and charges apply.)
8. **EMAIL ADDRESS** Please print neatly. \_\_\_\_\_
9. **WILL YOU BE 22 OR OLDER WHEN YOU START CLASSES?**  Yes     No    **I AM A SENIOR CITIZEN.**  Yes     No
10. **I AM AN INTERNATIONAL STUDENT.**  Yes     No    If you selected "Yes", please stop working on this application and complete our Application for International Undergraduate Admission instead. You can find the online version of the Application for International Undergraduate Admission at [coastal.edu/admissions/apply.html](http://coastal.edu/admissions/apply.html). You will also find a link to print a paper version of the International Undergraduate Application.  
Country of birth \_\_\_\_\_ Country of citizenship \_\_\_\_\_  
I am a permanent resident of the United States.  Yes     No    Alien registration number (include a copy of Green Card): \_\_\_\_\_
11. **DATE OF BIRTH** (mm/dd/yy) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
12. **GENDER**  Male     Female
13. **MILITARY VETERAN / ACTIVE MILITARY**  
Are you currently or have you ever been a member of the U.S. Armed forces?  Yes     No  
If YES, please check one of the following:  Active duty     Active reserve     Reserve component     Veteran  
Are you the spouse or a DEPENDENT of a full-time member of the U.S. armed forces?  Yes (Spouse)     Yes (Dependent)     No  
Are you seeking readmission to the University after having been called-up to active military service through the reserves or drafted before the end of your last semester?  Yes     No
14. I plan to enroll in Coastal Carolina University's Army ROTC program?  Yes     No
15. **ETHNIC ORIGIN / RACE**  
I am Hispanic or Latino.  Yes     No  
What is your race? Regardless of your answer to the previous question, please mark one or more races to indicate what you consider yourself to be.  
 American Indian or Alaska Native     Asian     Black/African American     Native Hawaiian or Other Pacific Islander     White

16. **FAMILY CONTACT INFORMATION** (check relationship to you):  Parent  Spouse  Guardian  Other \_\_\_\_\_  
 Last name \_\_\_\_\_ Suffix (Jr., III, IV) \_\_\_\_\_  
 First name \_\_\_\_\_ Middle name \_\_\_\_\_  
 Home/permanent address • P.O. Box, RFD, Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Zip + four \_\_\_\_\_  
 Telephones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
 Email address (Please print neatly.) \_\_\_\_\_

17. **I PLAN TO LIVE:**  In University Housing  Off-campus, Non-University Housing **NOTE:** First-year freshmen are required to live on campus.

18. **I PLAN TO ATTEND CLASSES:**  Full-time  Part-time

19. **ARE YOU INTERESTED IN PURSUING AN ACCELERATED DEGREE PROGRAM?**  Yes  No  
 You can obtain more information regarding accelerated degree programs by visiting [coastal.edu/accelerate](http://coastal.edu/accelerate).

20. **PLEASE ENTER THE MAJOR CODE** (located on page 6 of this application).  
 a. I plan to major in: \_\_\_\_\_ b. Specialization, if applicable: \_\_\_\_\_ c. Pre-Professional major, if applicable: \_\_\_\_\_

21. **DO YOU CLAIM RESIDENCY IN SOUTH CAROLINA FOR PURPOSES OF IN-STATE TUITION?**  Yes  No  
 Complete the Dependent Residency Information Form on page 5 if you RECEIVE more than half of your support from a parent, guardian or spouse.  
 Complete the Independent Residency Information Form on page 6 if you PROVIDE more than half of your support and you will NOT be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.  
 If all questions are not answered completely, you will be considered an OUT-OF-STATE student for Tuition and Fee Purposes.

**ACADEMIC HISTORY**

22. **HIGH SCHOOL FROM WHICH YOU WILL GRADUATE OR GRADUATED:**  
 Name of high school \_\_\_\_\_  
 State \_\_\_\_\_ Years attended (yyyy to yyyy) \_\_\_\_\_ to \_\_\_\_\_ CEEB HS Code \_\_\_\_\_  
 High school graduation date: Month/Year (mm/yy) \_\_\_\_\_ or GED (mm/yy) \_\_\_\_\_ Issued in which state? \_\_\_\_\_

23. **TESTS:** Check tests you have taken or will take in the future (list test dates by month and year). Are you applying with an SAT/ACT Fee Waiver?  Yes  No  
 SAT: Date 1 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 2 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 3 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 4 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 5 (mm/yy) \_\_\_\_ / \_\_\_\_  
 ACT: Date 1 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 2 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 3 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 4 (mm/yy) \_\_\_\_ / \_\_\_\_ Date 5 (mm/yy) \_\_\_\_ / \_\_\_\_

24. **LIST ALL COURSES IN WHICH YOU PLAN TO REGISTER AND COMPLETE DURING YOUR SENIOR YEAR IN HIGH SCHOOL:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

25. **COLLEGES ATTENDED:** Have you attended any college, either full-time or part-time, since graduation or taken any college-level courses while in high school? If yes, please list below all colleges attended, current or most recent first, and ask the institution(s) to forward an official transcript of your work directly to Coastal Carolina University. The University may verify your previous attendance at all institutions through the National Student Clearinghouse.  
 Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_  
 Have you earned an Associate of Arts or an Associate in Science degree?  Yes  No  
 Credits earned \_\_\_\_\_ Date entered (mm/yy) \_\_\_\_\_ / \_\_\_\_\_ Date leaving (mm/yy) \_\_\_\_\_ / \_\_\_\_\_  
 Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_  
 Credits earned \_\_\_\_\_ Date entered (mm/yy) \_\_\_\_\_ / \_\_\_\_\_ Date leaving (mm/yy) \_\_\_\_\_ / \_\_\_\_\_  
 Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_  
 Credits earned \_\_\_\_\_ Date entered (mm/yy) \_\_\_\_\_ / \_\_\_\_\_ Date leaving (mm/yy) \_\_\_\_\_ / \_\_\_\_\_

26. **I FIRST LEARNED ABOUT COASTAL CAROLINA UNIVERSITY FROM** (check the most appropriate):  
 A. A family member who graduated from Coastal Carolina University  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 B. A family member who attended/currently attends Coastal Carolina University  
 C. Alumnus referral  
 D. A student currently attending Coastal Carolina University  
 E. A Coastal Carolina University faculty or staff member referral  
 F. Meeting an admissions counselor at a college fair  
 G. A visit to campus  
 H. A coach's referral  
 I. I received a mailing from Coastal Carolina University  
 J. The Coastal Carolina University website  
 K. Vacation travel to Myrtle Beach  
 L. Other. Specify: \_\_\_\_\_

**27. PERSONAL HISTORY** (check the activities you have participated in):

CLUBS:

- |  |  |  |  |  |
|--|--|--|--|--|
| <input type="checkbox"/> A. 4-H          | <input type="checkbox"/> F. Dance            | <input type="checkbox"/> K. Forensics    | <input type="checkbox"/> P. Newspaper          | <input type="checkbox"/> U. ROTC         |
| <input type="checkbox"/> B. Band         | <input type="checkbox"/> G. Debate           | <input type="checkbox"/> L. FTA          | <input type="checkbox"/> Q. Science Club       | <input type="checkbox"/> V. Other: _____ |
| <input type="checkbox"/> C. Beta Club    | <input type="checkbox"/> H. Drama Club       | <input type="checkbox"/> M. Key Club     | <input type="checkbox"/> R. Scouts             | _____                                    |
| <input type="checkbox"/> D. Choir        | <input type="checkbox"/> I. FBLA             | <input type="checkbox"/> N. Keyette Club | <input type="checkbox"/> S. Student Government | _____                                    |
| <input type="checkbox"/> E. Church Youth | <input type="checkbox"/> J. Foreign Language | <input type="checkbox"/> O. Math Club    | <input type="checkbox"/> T. Yearbook           | _____                                    |

HONORS:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1. Boys State        | <input type="checkbox"/> 4. Girl Scouts Silver     | <input type="checkbox"/> 7. Other: _____ |
| <input type="checkbox"/> 2. Eagle Scouts      | <input type="checkbox"/> 5. Girls State            | _____                                    |
| <input type="checkbox"/> 3. Girls Scouts Gold | <input type="checkbox"/> 6. National Honor Society | _____                                    |

ATHLETICS:

- |  |   |                                       |   |  |
|--|---|---------------------------------------|---|--|
| <input type="checkbox"/> BS. Baseball      | <input type="checkbox"/> DV. Diving       | <input type="checkbox"/> LC. Lacrosse | <input type="checkbox"/> TN. Tennis     | <input type="checkbox"/> OT. Others: _____ |
| <input type="checkbox"/> BB. Basketball    | <input type="checkbox"/> FH. Field Hockey | <input type="checkbox"/> SC. Soccer   | <input type="checkbox"/> TK. Track      | _____                                      |
| <input type="checkbox"/> CH. Cheerleader   | <input type="checkbox"/> FB. Football     | <input type="checkbox"/> SB. Softball | <input type="checkbox"/> VB. Volleyball | _____                                      |
| <input type="checkbox"/> CC. Cross Country | <input type="checkbox"/> GF. Golf         | <input type="checkbox"/> SW. Swimming | <input type="checkbox"/> WR. Wrestling  | _____                                      |

**28. COMMUNITY STANDARDS**

All applicants are required to complete responses to a series of community standards questions on the application for admission. Responses to these questions are initially reviewed by the Office of Admissions and some cases are referred to the Community Standards Committee for review. An applicant must be approved by the community standards review process prior to being admitted to the University. This community standards review process supports the University's goal of maintaining a safe learning community. Failure to submit complete responses and/or falsification of responses may result in revocation of the admission decision or dismissal if the student presents false information or an incomplete response is discovered after enrollment. Any incident resulting in any change to a community standards question subsequent to the application must be immediately reported by the applicant to the Office of Admissions in writing. Failure to do so may result in the revocation of the admission decision or dismissal of the applicant after enrollment. In addition, registered sex offenders are not allowed to enroll in classes or participate in campus activities. Failure to disclose registration at any time shall result in immediate dismissal.

If you answer "yes" to any of the questions below, you are required to provide your own written explanation of the event(s) and a copy of the police incident and arrest report and/or a statement from an appropriate official summarizing the event(s) and the final disposition of your case. If you are/were not represented by legal counsel in connection with the event(s), in addition to your own written explanation, you must also provide court records summarizing the event(s) and the final disposition of your case. Print your full name at the top of each page, and date and sign each page. All documentation must be mailed to the Office of Admissions.

1.  Yes  No Have you been adjudicated, processed, involved in pretrial diversion or entered into a contract through juvenile court, or arrested without a conviction in which the record has not been expunged?
2.  Yes  No Have you ever been pardoned in any court? If so, please provide details as to the crime and conviction in which the record has not been expunged.
3.  Yes  No Have you ever entered into any pretrial diversion program as an adult in which the record has not been expunged?
4.  Yes  No Have you been convicted of a crime as an adult or juvenile?
5.  Yes  No Have you entered a plea of guilty, a plea of no contest, a plea of "nolo contendere," an Alford plea, or a plea of delinquency in juvenile court, or have you received a deferred prosecution or prayer for judgment continued to a criminal charge?
6.  Yes  No Have you otherwise accepted responsibility for the commission of a crime or entered a pre-trial/diversion program?
7.  Yes  No Do you have any criminal charges pending against you?
8.  Yes  No Have you ever been assigned or received out-of-school suspension (OSS) or been expelled from high school, or placed on **disciplinary** probation or suspension by any college or university? This may include, but is not limited to, academic cheating, conduct violations, or alcohol policy infractions. If you answer "yes," you are required to attach a statement from an appropriate school official corroborating your summary of the event in addition to your own explanation of the event.
9.  Yes  No If you served in the military, did you receive any type of discharge other than an honorable discharge? If you have not served in the military, respond "No."

**Written statement (required for all "yes" responses):**

---



---



---



---



---



---

**29. IF YOU HAVE BEEN SEPARATED FROM HIGH SCHOOL OR COLLEGE FOR MORE THAN SIX MONTHS OR ONE TERM, PLEASE EXPLAIN HOW YOU HAVE BEEN USING YOUR TIME.**

---



---



---



---



---



---

**30. APPLICATION AGREEMENT**

I certify that these responses are true and complete to the best of my knowledge, pursuant to reasonable inquiry where needed, and I am aware that any knowing omissions or falsification herein may result in disciplinary action including denial of admission or dismissal after admission. Further, it is my understanding that I shall not be considered for admission to the University until I have submitted all credentials. I agree to inform the Office of Admissions, in writing, of any change in my plans to attend the University and any change to my responses to questions on this application. I understand that if I discontinue my enrollment in a major term at Coastal Carolina University at any time, I must submit a new application by the appropriate deadline. I also understand that the provision of my Social Security Number and my ethnicity/racial origin are not required to be considered for admission to the University.

My signature below is my promise that, should I enroll at Coastal Carolina University, I will abide by all rules and policies of the Code of Student Conduct and Academic Responsibilities as outlined in the University's Student Handbook. A copy of the handbook can be found at [coastal.edu/deanofstudents](http://coastal.edu/deanofstudents). Failure to truthfully disclose information may subject you to immediate expulsion.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_  
(if applicant is under 18 years of age)

(Rev. September 2014)

**APPLICATION FEE**

Credit card authorization for payment of the application fee (Complete this section only if you are paying the application fee by credit card. Please PRINT clearly.)

I authorize the use of my credit card account. AMOUNT: \$ \_\_\_\_\_

Please check the appropriate card:  MasterCard  Visa  Discover  American Express

Name (as it appears on credit card) \_\_\_\_\_

Signature \_\_\_\_\_ Daytime telephone ( \_\_\_\_\_ ) \_\_\_\_\_

16-digit Credit Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration date \_\_\_\_\_ / \_\_\_\_\_

**Residents of the State of South Carolina are required to complete ONE of the residency information forms on page five (5) or six (6) of this application. If you do not provide this information, you will be classified as an out-of-state student for tuition and fee purposes.**

**APPLICANT: If a parent or guardian provides half of your support, complete this form with your parent's/guardian's information.**

Term \_\_\_\_\_



## DEPENDENT - RESIDENCY INFORMATION FORM

Applicants who claim South Carolina residence for tuition and fee purposes must complete this form in its entirety. Additional information may be requested per SC Law 59-112. South Carolina residency requirements may be found online at [che.sc.gov](http://che.sc.gov).

### Student Information

Name of student \_\_\_\_\_

Social Security Number or CCU ID \_\_\_\_\_

Age \_\_\_\_\_ Date of birth (mm/dd/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ City and State of birth \_\_\_\_\_

### Residency Information

You have indicated that you are a current high school student or a dependent of a parent or guardian; please enter your parent/guardian's information below. A dependent student is defined as one who will receive more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment from a parent, guardian or spouse and will be claimed as a dependent or exemption on that individual's income tax returns.

WITH WHOM DO YOU RESIDE?  Self  Both parents  Father  Mother  Other \_\_\_\_\_

WHO CLAIMS YOU FOR FEDERAL INCOME TAX PURPOSES?  Self  Both parents  Father  Mother  Other \_\_\_\_\_

PARENT'S MARITAL STATUS:  Single/never married  Married  Divorced/separated  Widowed  Re-married

IF PARENTS ARE DIVORCED OR SEPARATED, WHO IS THE CUSTODIAL PARENT?  Not applicable  Father  Mother  Shared custody

#### NAME OF PERSON WHO PROVIDES THE MAJORITY OF YOUR FINANCIAL SUPPORT?

First name \_\_\_\_\_ Last name \_\_\_\_\_ Relationship \_\_\_\_\_

CITIZENSHIP:  U.S. citizen  Permanent Resident  Not a U.S. Citizen or Permanent Resident

HOW LONG HAS PARENT/GUARDIAN RESIDED IN SOUTH CAROLINA? Years \_\_\_\_\_ Months \_\_\_\_\_

ADDRESS (Street, City, State, Zip code) \_\_\_\_\_

#### DRIVER'S LICENSE:

State \_\_\_\_\_ Date issued \_\_\_\_\_  New (first issued)  Renewed Expiration date (mm/dd/yy) \_\_\_\_\_

#### VEHICLE REGISTRATION:

State \_\_\_\_\_ Date issued \_\_\_\_\_  New (first issued)  Renewed Purchase date (mm/dd/yy) \_\_\_\_\_

IF YOUR PARENT/GUARDIAN RELOCATED TO SOUTH CAROLINA, WHAT WAS THE PREVIOUS STATE OF RESIDENCE? \_\_\_\_\_

EMPLOYMENT STATUS:  Full-time  Part-time  Unemployed  Retired  Disabled

Employer name \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Employer address \_\_\_\_\_

Employment Dates: From (mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ To (mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

IF YOUR CLAIM TO SOUTH CAROLINA RESIDENT STATUS IS BASED UPON ACTIVE MILITARY ASSIGNMENT TO THE STATE, PLEASE SUBMIT A COPY OF CURRENT ORDERS TO THE OFFICE OF ADMISSIONS.

Branch of Service:  USAF  USA  USN  USMC  USCG Home of record on L.E.S \_\_\_\_\_

I certify that all information provided is accurate and complete. I further understand that falsification or failure to provide the correct information may lead to the disqualification of my application for admission to Coastal Carolina University.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

PARENT'S / GUARDIAN'S INFORMATION

### Office of Admissions – Residency

Coastal Carolina University • P.O. Box 261954 • Conway, SC 29528-6054 • 843-349-2170 or 1-800-277-7000 • 843-349-2127 FAX  
[scresidency@coastal.edu](mailto:scresidency@coastal.edu) • [coastal.edu/admissions/residency](http://coastal.edu/admissions/residency)

**APPLICANT: If you provide more than half of your support, complete this form with your information.**

Term \_\_\_\_\_



**INDEPENDENT - RESIDENCY INFORMATION FORM**

Applicants who claim South Carolina residency for tuition and fee purposes **must complete this form in its entirety**. Additional information may be requested per SC Law 59-112. South Carolina residency requirements may be found online at che.sc.gov.

**Student Information**

Name of student \_\_\_\_\_

Social Security Number *or* CCU ID \_\_\_\_\_

Age \_\_\_\_\_ Date of birth (mm/dd/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ City and State of birth \_\_\_\_\_

**Residency Information**

An **INDEPENDENT** student is defined as one who will provide more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment and will **NOT** be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.

**STUDENT'S / APPLICANT'S INFORMATION**

CITIZENSHIP:  U.S. citizen     Permanent Resident     Not a U.S. Citizen or Permanent Resident

HOW LONG HAVE YOU RESIDED IN SOUTH CAROLINA? Years \_\_\_\_\_ Months \_\_\_\_\_

ADDRESS (Street, City, State, Zip code) \_\_\_\_\_

YOUR MARITAL STATUS:  Single/never married     Married     Divorced/separated     Widowed     Re-married

CURRENT RESIDENCE:  Rent/lease     Own     With parents     Campus residence

WHO CLAIMS YOU FOR FEDERAL INCOME TAX PURPOSES?  Self     Both parents     Father     Mother     Other \_\_\_\_\_

DRIVER'S LICENSE:  
State \_\_\_\_\_ Date issued \_\_\_\_\_  New (first issued)     Renewed    Expiration date (mm/dd/yy) \_\_\_\_\_

VEHICLE REGISTRATION:  
State \_\_\_\_\_ Date issued \_\_\_\_\_  New (first issued)     Renewed    Purchase date (mm/dd/yy) \_\_\_\_\_

IF YOU HAVE RELOCATED TO SOUTH CAROLINA, WHAT WAS YOUR PREVIOUS STATE OF RESIDENCE? \_\_\_\_\_

EMPLOYMENT STATUS:  Full-time     Part-time     Unemployed     Retired     Disabled

Employer name \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Employer address \_\_\_\_\_

Employment Dates: From (mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ To (mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

IF YOUR CLAIM TO SOUTH CAROLINA RESIDENT STATUS IS BASED UPON ACTIVE MILITARY ASSIGNMENT TO THE STATE, PLEASE SUBMIT A COPY OF YOUR CURRENT ORDERS TO THE OFFICE OF ADMISSIONS.

Branch of Service:  USAF     USA     USN     USMC     USCG    Home of record on L.E.S \_\_\_\_\_

I hereby certify that the information I have provided is accurate and complete. I further understand that falsification or failure to provide the correct information may lead to disqualification of my application for admission to Coastal Carolina University. By signing below, I acknowledge this information will be used to determine South Carolina residency status for tuition and fee purposes.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**Office of Admissions – Residency**

Coastal Carolina University • P.O. Box 261954 • Conway, SC 29528-6054 • 843-349-2170 or 1-800-277-7000 • 843-349-2127 FAX  
scredidency@coastal.edu • coastal.edu/admissions/residency



# COASTAL CAROLINA UNIVERSITY

## Guidance Counselor Recommendation Form

(for freshmen only)

Instructions: Please attach the applicant's official transcript, including courses in progress, and, if available, a school profile and transcript legend. Then mail the application, application fee and transcript to:  
Coastal Carolina University, Office of Admissions, P.O. Box 261954, Conway, SC 29528-6054.

Student's name \_\_\_\_\_

Cumulative grade point average \_\_\_\_\_ on a scale of \_\_\_\_\_

Rank \_\_\_\_\_ in a class of \_\_\_\_\_ Rank is  estimated  computed

**▶ SAT I SCORES**

Date taken \_\_\_\_\_

Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Total \_\_\_\_\_

Date taken \_\_\_\_\_

Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Total \_\_\_\_\_

**▶ ACT SCORES**

Date taken \_\_\_\_\_ Composite \_\_\_\_\_

English \_\_\_\_\_ Math \_\_\_\_\_ Science \_\_\_\_\_ Reading \_\_\_\_\_

Writing \_\_\_\_\_ Combined English/Writing \_\_\_\_\_

Date taken \_\_\_\_\_ Composite \_\_\_\_\_

English \_\_\_\_\_ Math \_\_\_\_\_ Science \_\_\_\_\_ Reading \_\_\_\_\_

Writing \_\_\_\_\_ Combined English/Writing \_\_\_\_\_

**▶ GRADING SCALE**

(i.e., A = 90 to 100)

A = \_\_\_\_\_

B = \_\_\_\_\_

C = \_\_\_\_\_

D = \_\_\_\_\_

Will Graduate

Withdrew (Date \_\_\_\_\_)

Graduated (Year \_\_\_\_\_)

If this student is a South Carolina resident, will the student have completed upon graduation the CHE high school course prerequisites for applicants to South Carolina public colleges and universities?  Yes  No  N/A

Comments and recommendations:  Below  School policy precludes any recommendations

**RECOMMENDATION:**

Highly Recommended

Recommend

Recommended with Reservations

Do Not Recommend

Name of school (please print or type) \_\_\_\_\_

Counselor's name \_\_\_\_\_

Position \_\_\_\_\_

Office telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_

Email address \_\_\_\_\_

Date \_\_\_\_\_

CEEB/ACT School Code 

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

## ► MAJORS

All degree-seeking students must declare a major. Indicate one of the following choices on the application. Please enter the code on question 20 from the list below.

### BUSINESS ADMINISTRATION

- Accounting – ACCP
  - Certified Public Accountant – CPA
  - Certified Management Accountant/ Certified Financial Manager – CMAFA
- Economics – ECONP
- Finance – FINP
  - Financial Management – FMGT
  - Financial Services – FSRV
  - Wealth Management – WMGT
- Hospitality, Resort and Tourism Management – HRTMP
- Management – MGTP
  - Entrepreneurial Management – EM
  - General Management – GEN
  - Human Resources Management – HRM
  - International Management – IM
  - Operations and Technology Management – OTM
  - Organizational Leadership – OL
- Marketing – MKTP

**NOTE:** A specialization in PGA Golf Management (PGM) is available for all majors in the Wall College of Business – PGMP

### EDUCATION

- Early Childhood Education (PreK-3) – ECEDP
- Elementary Education (2-6) – ELEDP
- Middle Level Education (5-8) – MGEDP (must choose two)
  - Math – MATH
  - Science – SCIE
  - Social Studies – SSTD
  - English – ENGL
- Physical Education (K-12) – PHED
- Special Education-Learning Disabilities (PreK-12) – SPEDP

Coastal Carolina University offers a graduate level Masters of Arts in Teaching (M.A.T.) program in the areas of:

Art	English	Mathematics
Music	Science	Social Studies

If you are interested in becoming a licensed teacher in any of these areas, you should first earn an undergraduate degree in that area of concentration. In your junior and senior years, you would be allowed to take three courses which can apply toward this degree. For more information, contact the Office of Graduate Studies at 843-349-2394.

### HUMANITIES and FINE ARTS

- Art Studio – ARTS
- Communication – COMM
  - Communication Studies – CSTD
  - Health Studies – HCOM
  - Interactive Journalism – IJOUR
  - Public Relations/Integrated Communication – PRCOM
- English – ENGL
- Graphic Design – GDES
- History – HIST
- Intelligence and National Security Studies – INTEL
- Music – MUSP \*
- Musical Theatre – MUTHP \*\*
- Philosophy – PHIL
- Political Science – PSCI
  - Domestic Politics – DPOL
  - Global Politics – GPOL
- Theatre Arts – TARTP \*\*
  - Acting – ACT
  - Design and Technology – DTCH
  - Physical Theatre – PHTH

\*All students who desire to pursue a bachelor of arts (B.A.) degree in music must successfully complete an audition. For more information, go to: [coastal.edu/music](http://coastal.edu/music).

\*\*All students who desire to pursue a bachelor of fine arts (B.F.A.) degree in theatre arts or musical theatre must successfully complete an audition. For more information, go to [coastal.edu/theatre](http://coastal.edu/theatre).

### INTERDISCIPLINARY STUDIES

- Interdisciplinary Studies – INTSP (only for transfer applicants)

### UNDECLARED

- Undeclared – UNUG

### PRE-PROFESSIONAL MAJORS

- Pre-Allied Health/Biology – AH
- Pre-Dental/Biology – DT
- Pre-Law/Political Science – LW
- Pre-Medical/Biology – MD
- Pre-Pharmacy/Biology – PH
- Pre-Physical Therapy/Biology – PT
- Pre-Veterinary/Biology – VT

### SCIENCE

- Biochemistry – BCHEM
- Biology – BIOL
  - Cellular, Molecular Biology and Genetics – CMGH
  - Ecology, Evolution, and Conservation Biology – EECO
  - Integrative Biology – IBIO
- Chemistry – CHEM
- Computer Science – CSCI
- Dual Degree Engineering (3+2 Dual Degree Program with Clemson University) You must select one of the following Coastal Carolina University/Clemson dual majors:
  - Biology/Engineering – BIO-E
  - Chemistry/Engineering – CHM-E
  - Computer Science/Engineering – CSC-E
  - Mathematics/Engineering – MTH-E
  - Applied Physics/Engineering – PHY-E
- Exercise and Sport Science – EXSS
- Health Administration – HADM (only for transfer applicants, online degree completion program)
- Health Promotion – HLPR
- Information Systems – INFSY
- Information Technology – IT
- Marine Science – MSCIP
- Mathematics (applied) – MATHA
- Nursing – NUR (Only for transfer applicants with an RN License.)
- Physics (applied) – PHYSA
  - General – GEN
  - Environmental Physics – ENVPH
  - Engineering Physics – ENGPH
- Psychology – PSYC
- Recreation and Sport Management – RSM
  - Recreation Management – RMGT
  - Sport Management – SMGT
- Sociology – SOC
  - Generalist – GEN
  - Criminology – CRIM
  - Health and Aging – HLAG
  - Social Justice – SJUS