



GRADUATE APPLICATION FOR READMISSION

UHD Office of Admissions – Graduate Admissions
One Main Street, Suite N325, Houston, Texas 77002-1001

WWW.UHD.EDU

713-221-8522

APPLICATION SHOULD BE MAILED TO THE ADDRESS ABOVE

ACADEMIC PROGRAM
(check only one)

Master of Arts in Teaching

Master of Science in Criminal Justice

Master of Security Management

Master of Science in Professional Writing
& Technical Communication

SEMESTER YOU PLAN TO ENROLL (circle only one and indicate year)

Fall 20 ____

Spring 20 ____

Summer 20 ____

UHD-ID

FULL LEGAL NAME (please print)

Last

First

Middle

Maiden name

Previous last name

ADDRESS

Number/ street/ apt. number

City

County

State

ZIP code

Telephone – Home number
Area code

*Do not use pager numbers

Telephone – Work number
Area code

E-Mail

EMERGENCY CONTACT INFORMATION

Last

First

Middle

Relationship:

Spouse

Guardian

Parent

Other/Relative

Other/Non-Relative

Telephone – Home number

*Do not use pager numbers

Telephone – Work number

APPLICANT'S PLACE OF BIRTH

City

State

Country

U.S. RESIDENCY INFORMATION

Are you a United States Citizen?

Yes

No

If "No", place of citizenship: _____

If you are not a U.S. citizen by birth, please check one of the following and bring original documents to the Office of Admissions with your application

- ____ 1. Naturalized Citizen
- ____ 2. I-551 (Permanent Resident Card)
- ____ 3. I-688
- ____ 4. I-688A
- ____ 5. I-688B
- ____ 6. I-94
- ____ 7. I-485
- ____ 8. I-130
- ____ 9. HB1403
- ____ 10. VISA _____ (Indicate Type)

Card Number _____

Date Issued _____

Date Expires _____

TEXAS RESIDENCY INFORMATION

On whom are you basing your claim of residency? (check only one)

Self Parent Spouse Court-appointed Guardian

Name of the person indicated above: _____

Has the person indicated above:

A. Resided in Texas for the past 12 months?

Yes No If "No", where _____

B. Been employed in Texas for the past 12 months?

Yes No Full Time Part Time

List all jobs held by the person indicated above (please list most recent job first):

Name of Company	City	State	From Month/ Year	To Month/ Year

MILITARY INFORMATION	
Have you/your spouse/your parent ever been a member of the U.S. Armed Forces?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes", complete the following information:	
Date of induction: Month/Year _____	
Location of induction: City _____ State _____	
Date of release from active duty: Month/Year _____	

COLLEGE/UNIVERSITY

List all colleges/universities you have attended since you last attended UH-Downtown. You must submit official transcripts for each school listed. Include attendance at any of the UH System campuses. **DO NOT ABBREVIATE SCHOOL NAMES.**

School or Institution	City	State	From (Month/ Year)	To (Month/ Year)

ETHNIC CODE

The following items are required by the U.S. Department of Education under the provisions of Title VI of the Civil Rights Act and may not be used for discriminatory purposes:

1. White/Non-Hispanic 2. Black/African Amer. 3. Hispanic 4. Asian/Pacific Islander 5. Native Amer./Alaska Native

GENDER

1. Male 2. Female

DATE OF BIRTH

Month Day Year

Certification: I hereby agree to abide by all rules and regulations of the University of Houston-Downtown, if accepted as a student. I certify this information is correct. I understand that misrepresentation; omission of information, or failure to submit transcripts from all colleges and/or universities may be cause for denial of admission or dismissal and loss of semester credit hours, if I have already registered for class.

Signature _____

Date _____