



## Submit Application to: Jacket Student Central City College at MSU Billings 3803 Central Avenue Billings, MT 59102 (406) 247-3012

When you become a Montana State University Billings student following your high school graduation, you will need to submit the \$30 application fee, a final high school transcript, ACT or SAT scores and complete the full application for admission.

| Name:  | ne:Social Security Number:(optional) |                  |                       |                                     |  |
|--|--------------------------------------|------------------|-----------------------|-------------------------------------|--|
| Term of Enrollment: Fall 20  | Spring 20                            | )                |                       |                                     |  |
| Street Address:  |                                      |                  |                       |                                     |  |
| City:  |                                      | State:           | Zip:                  |                                     |  |
| Home Phone: ()   |                                      | Birthdate:       | /                     |                                     |  |
| E-mail:  |                                      | Gender:          | Male                  | Female                              |  |
| Name of High School:   | H.S. Graduation Year:                |                  |                       |                                     |  |
| State of Residency:  |                                      |                  |                       |                                     |  |
| Ethnicity: This information is for statistical analysis on a. Indicate your ethnic identity by checking the appropriate b b. If not Hispanic or Latino, indicate which of one or more ra | oxes:                                | panic / Latino   | ot Hispanic or Latino |                                     |  |
| Asian (Specify country of origin)  |                                      | □ Native Hawe    | and of other racine   | Islander (Specify country or origin |  |
| *I want to register for the following High Sc  |                                      |                  |                       |                                     |  |
|  | //                                   |                  |                       | //                                  |  |
| Student Signature  Py my signature I give the University permission to   | Date                                 | Parent Signature |                       | Date                                |  |
| By my signature, I give the University permission to   | / /                                  | ر ۱ ۱ م          | заг ироп сотпріес     | ion or my course(s).                |  |
| Counselor, Principal or Home School Official Signature   | //<br>Date                           | Phone Number     |                       | //<br>Date                          |  |

By my signature, I agree that this student is capable of doing University-level work.

<sup>\*</sup>Registration is limited to class availability. Please contact Harold Olson at (406) 247-3015 or harold.olson1@msubillings.edu