

A P P L I C A T I O N

UNDERGRADUATE ADMISSION



www.uiw.edu

UNIVERSITY OF THE INCARNATE WORD®
(INSTRUCTIONS INSIDE)

I N S T R U C T I O N S

(You may also apply online at www.uiw.edu)

APPLICATION DEADLINES:

University of the Incarnate Word (UIW) has rolling admissions, which means qualified applicants are admitted throughout the year. Depending on application volume, decisions are generally made within a three week period. The \$20 application fee is waived for those applying prior to February 1st (priority application date) for the fall semester.

FIRST-TIME FRESHMAN

- Request an official high school transcript to be sent to the Office of Admissions
- Letters of recommendation are encouraged, but not required. Letters of recommendation can be sent from a counselor, teacher or other school official.
- Request that your guidance counselor send an official high school transcript including current courses and complete the counselor recommendation form.
- Send SAT and/or ACT scores. Applicants who have taken the SAT or ACT more than once should send all score results. The SAT code is 6303. The ACT code is 4106. (High school graduates of two years or more are not required to submit SAT/ACT scores.)
- General Equivalency Diploma (GED) recipients must submit official verification with test scores, and an official transcript of all high school work completed.
- Applicants who wish to address circumstances regarding their application are encouraged to submit a letter of explanation.

TRANSFER

- Request official transcript(s) from every college/university attended to be sent to the Office of Admissions.
- Applicants with fewer than 24 semester hours of college-level work completed must submit an official high school transcript and SAT or ACT scores in addition to college transcript(s). (High School graduates of two years or more are not required to submit SAT or ACT scores.)
- Applicants who wish to address circumstances regarding their application are encouraged to submit a letter of explanation.

TRANSIENT

- Submit official transcript or letter of good standing from last college or university attended.

FINANCIAL ASSISTANCE

UIW offers financial assistance to those who, for financial reasons, might otherwise be unable to attend. We believe that all students should be able to attend the university that best suits their academic and personal needs. The financial assistance philosophy at UIW is to meet the published direct costs of all eligible students until funds are exhausted. Funds available include federal, state, and institutional.

To apply for financial assistance, all students must complete a Free Application for Federal Student Aid (FAFSA) and submit it to the federal processor, or it can be submitted to the Office of Financial Assistance for processing. The FAFSA form can be obtained from your high school guidance office, transfer center, the Office of Financial Assistance or online at www.fafsa.ed.gov. The results of the FAFSA will be used to determine your financial aid eligibility. The federal school code for UIW is 003578. Students are also asked to complete the UIW Student Information Form available through the Office of Financial Assistance or online at www.uiw.edu/finaid (click on the "forms" link).

For questions concerning financial assistance at UIW, call the Office of Financial Assistance at (210) 829-6008, or refer to the website at www.uiw.edu/finaid.

SCHOLARSHIPS

Freshman academic scholarships are awarded on the basis of academic performance and SAT/ACT scores. Transfer scholarships are awarded on the basis of college academic performance. Consideration is automatic and requires no additional application.

Performance and visual arts scholarships are awarded on the basis of auditions and/or presentations in the areas of art, music, theatre, and dance. These scholarships are coordinated through the corresponding departments. Athletic scholarships are also available and are based on tryouts and/or observation by the athletic department. For further information on athletic scholarships, please contact the Athletic Office at (210) 829-2722, or refer to the website at www.uiwcardinals.com.

For further information regarding scholarships, please refer to the Office of Financial Assistance website at www.uiw.edu/finaid.

DISABILITY SUPPORT SERVICES

Students requiring accommodations under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 can apply for Eligibility Support Services. For more information, contact the Coordinator of Student Disability Services at (210) 805-5814.

ACADEMIC PROGRAM

Using the list below, please indicate your intended major/concentration: _____
(If interested in All-Level Certification or Secondary Certification, please indicate preferred teaching field. If interested in an advisement track, please indicate at the bottom of the page.)

COLLEGE OF HUMANITIES, ARTS AND SOCIAL SCIENCES

Art	Music	Political Economy (concentration only)
Art History (minor only)	Music Performance	Psychology
Asian Studies (concentration only)	Music Composition	Religious Studies
Criminal Justice	Music Education	Sociology
Cultural Studies	Music Industry Studies	Spanish
English	Music Therapy	Theatre Arts
Government - American Politics	Pastoral Ministry	Women and Gender Studies (minor only)
Government - International Relations	Philosophy	
History	Photography (minor only)	

H-E-B SCHOOL OF BUSINESS AND ADMINISTRATION

Accounting	Management Information Systems	Management
Actuarial Science (minor only)	Professional Golf Management	Marketing
Banking and Finance	International Economics (with Universidad de Monterrey)	Political Economy
Economics	International Business	Sports Management
General Business		

SCHOOL OF MEDIA AND DESIGN

Communication Arts:	Graphic Design	Fashion Design
Bilingual Communication Arts	3D Animation/game Design	Fashion Management:
Communication Studies	Computer Information Systems	Fashion Merchandising
Convergent Media		Product Development
Journalism		Interior Design
Media Production		
Media Studies		

DREEBEN SCHOOL OF EDUCATION

All-Level Certification with Specialized Teaching Field in: Art, Music, Physical Education, Spanish or Theatre Arts	Elementary Certification with Interdisciplinary Studies major and minors in Reading and Special Education	Secondary Certification with Specialized Teaching Field in English Language Arts/Reading, History, Life Science, Mathematics, Physical Science
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ILA FAYE MILLER SCHOOL OF NURSING AND HEALTH PROFESSIONS

Athletic Training	Nursing	Rehabilitative Science
Community Health Education	Nuclear Medicine Technology	
Kinesiology		

SCHOOL OF MATHEMATICS, SCIENCE AND ENGINEERING

Biology	Engineering	Meteorology
Biochemistry	Environmental Science	Nutrition
Broadcast Meteorology	Geology (minor only)	Physics (minor only)
Chemistry	Mathematics	

ROSENBERG SCHOOL OF OPTOMETRY

Vision Science (Pre-Optometry pathway)

ADVISEMENT TRACKS:

Using this list below, please indicate your intended advisement track (if applicable) _____

If choosing an advisement track, you must also choose an academic program.

Pre-Dentistry	Pre-Medicine	Pre-Pharmacy	Pre-Physical Therapy
Pre-Engineering	Pre-Optometry	(Biology or Chemistry)	Pre-Veterinary Science
Pre-Law			

Undeclared

*Students uncertain about academic major should apply as an undeclared major.

FAMILY INFORMATION

Give names/addresses of parents or guardian and/or spouse:

Check if Emergency Contact

Check if Emergency Contact

Relationship: _____ Relationship: _____

Name: _____ Name: _____

Home Phone: _____ Home Phone: _____

Address: _____ Address: _____

City/State/Zip: _____ City/State/Zip: _____

E-mail address: _____ E-mail address: _____

Occupation: _____ Occupation: _____

Work Phone: _____ Work Phone: _____

ACADEMIC HISTORY

High School: _____ Address: _____

City/State/Zip: _____ Phone Number: _____

Guidance Counselor: _____

Date of Graduation: Month _____ Year _____

GED Score _____ Year _____

Home Schooled (Refer to Undergraduate Bulletin for further instructions)

TRANSFER STUDENTS ONLY

List the name(s) and address(es) of the institution(s) you have attended and dates of attendance. Failure to disclose information regarding previous institutions is grounds for dismissal.

Name & City/State (college) From (month/year) To (month/year) Degree received and/or number of hours completed

1. _____

2. _____

3. _____

Have you signed a Joint Admissions Agreement (JAA) or are you following a transfer plan? Yes No

Are you a member of Phi Theta Kappa? Yes No Are you interested in reverse transfer? Yes No

TEST INFORMATION (Check all exams taken)

ACT Exam Yes No SAT Exam Yes No SAT Reasoning Exam Yes No AP Exam Yes No

IB Exam Yes No TOEFL Exam Yes No Accuplacer Exam Yes No

ACTIVITIES

Please list your hobbies and extracurricular activities in school, community, and church.

(Feel free to include more information on a separate page)

Activity

Grade Level

Positions or Honors

_____ 9 10 11 12 _____

_____ 9 10 11 12 _____

_____ 9 10 11 12 _____

U.I.W. activities in which you would like to participate:

- | | | |
|--|---|--|
| <input type="checkbox"/> Student Newspaper | <input type="checkbox"/> Campus Ministry | <input type="checkbox"/> Student Government |
| <input type="checkbox"/> Student Ambassadors | <input type="checkbox"/> Intramurals | <input type="checkbox"/> Instrumental Ensemble |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Theatre Arts | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Chorus | <input type="checkbox"/> Student Veterans | |

Do you plan to participate in varsity athletics at UIW? Yes No What sport? _____

Have you visited the U.I.W. Campus? Yes No When? _____

EMPLOYMENT/OTHER INFORMATION

Employer	Position held	Dates	Hours per week
1. _____			

LEGACY INFORMATION (Please list any family member who is currently enrolled or has graduated from UIW)

Name _____
relationship _____ class/year _____

Name _____
relationship _____ class/year _____

DECISION FACTORS

How did you first hear about Incarnate Word:

- | | | | |
|---|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> U.I.W. Alumna/Alumnus | <input type="checkbox"/> U.I.W. Coach | <input type="checkbox"/> Television | <input type="checkbox"/> Literature |
| <input type="checkbox"/> U.I.W. Student | <input type="checkbox"/> School Counselor | <input type="checkbox"/> Radio | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> U.I.W. Admissions Representative | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Internet | |

MENINGITIS INFORMATION:

Texas law requires all students under the age of 22 to provide proof of immunization against bacterial meningitis in the preceding five years prior to registering for classes. For more information please contact the UIW Health Services Office at 210-829-6017 or www.uiw.edu/health.

Please submit immunization records to the UIW Health Services Office in person, by fax at 210-829-3125 or email healthsvcs@uiwtx.edu.

Have you received your Meningitis vaccination within the last five years? Yes No

Applicants are welcome to submit letters of recommendation. Please enclose the non-refundable \$20.00 processing fee (check or money order) with your application.

By submitting this application, I certify that I am seeking to enroll at UIW and that the information which I have given on these pages is complete and true to the best of my knowledge. I agree that if accepted for admission, I shall comply with all the rules and regulations of the University which may be in effect or which shall be put into effect while I am a student.

Signature of Applicant

Date

**HIGH SCHOOL COUNSELOR/PRINCIPAL/TEACHER RECOMMENDATION FORM
(For First-Time Freshman Students ONLY)**

Applicants

Please complete the first three lines of this form and give to your counselor, principal or teacher to complete. You may mail your completed application with any attachments, along with the \$20 application fee, directly to the Office of Admissions at the University of the Incarnate Word.

Name _____

Address _____ City/State _____

Phone Number _____ E-Mail Address _____

Counselor/Principal/Teacher

Please complete the bottom portion of this form and mail to University of the Incarnate Word, Office of Admissions, 4301 Broadway, San Antonio, Texas 78209.

Counselor/Principal/Teacher Name _____

Title _____ High School _____

School Address _____ City/State _____

School Phone Number _____ High School Code _____

What is your recommendation regarding the applicant?:

- Recommend with enthusiasm
- Highly recommend
- Please call regarding this student
- Recommend, but with reservations
- Do not recommend

Comments:

Signature _____

Date _____



**Office of Admissions
University of the Incarnate Word
4301 Broadway St., San Antonio, TX 78209**

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