



Louisiana State University of Alexandria

Admission Application

www.lsua.edu
(318) 473-6417; (888) 473-6417
admissions@lsua.edu

Application Deadlines

Fall Semester: August 1
Spring Semester: December 1
Summer Semester: May 1

Admission requirements and documentation needed to complete admission can be found at **www.lsua.edu/admissions**.

Please email completed application to admissions@lsua.edu and call 318-473-6417 to submit application fee.

You may also mail your application to the address below along with the \$20.00 application fee to the following address:

Louisiana State University of Alexandria
Office of Admissions
8100 Hwy 71 South
Alexandria, LA 71302

Louisiana State University of Alexandria

Application for Admission or Re-Admission

STUDENT INFORMATION

Please print your **legal name**: _____
(NO NICKNAMES) Last First Middle

Social Security Number: _____ - _____ - _____ **Birthday:** _____ / _____ / _____
Month Day Year

Other names under which academic records may be found: _____

EMAIL ADDRESS: _____ () _____ () _____
Home Phone Cell Phone

MAILING ADDRESS: _____ **Parish/County:** _____

Street Address/P.O. Box City State Zip Code

PERMANENT HOME ADDRESS (please list an address where you may always be reached):

Street Address City State Zip Code

EMERGENCY CONTACT: _____
Name Phone Relationship to Applicant

ACADEMIC INFORMATION

Beginning Semester: Year _____ (check one) () Fall () Spring () Summer

Entry Status: (check one)

- () First-time Freshman - never attended college
() Transfer - attended college, but not LSUA
() Re-entry - previously attended LSUA
() Preparatory - High school student

Application Type: (check one)

- () Degree Seeking () Audit Only () Exchange Student
() Visiting Student - not degree-seeking
() POST - Earned a bachelor's degree & wish to take college courses
for enrichment or professional development; non-degree seeking

Current School Attending: _____

High School (if not the same as above): _____

High School Graduation Date (month/year): _____ / _____

Was your diploma awarded on the basis of the GED or HiSET: select one () Yes () No

Which test(s) have you taken? check ALL that apply

() ACT () SAT () AccuplacerNG Writing () AccuplacerNG QRAS

() ALEKS PPL () IELTS () TOEFL () DuoLingo

() Other (please specify): _____

Colleges: List all colleges you have attended/registered in/been enrolled in, including LSUA, and any correspondence courses taken prior to this admission. All institutions must be listed regardless of whether credit was earned or was desired. STUDENTS WHO FAIL TO ACKNOWLEDGE ATTENDANCE AT A COLLEGE OR UNIVERSITY WILL BE SUBJECT TO DISMISSAL FROM THE UNIVERSITY. **Official transcripts must be sent directly from each institution to LSUA.**

College or University	City/State	Dates of Attendance		Number Credit. Hrs. Earned	Degree Earned
		From Month/Yr.	To Month/Yr.		

Sending unofficial transcripts may expedite the Admissions Decision Process prior to receipt of OFFICIAL Transcripts

- How many total semester hours have you earned? () 0-29 () 30-59 () 60-89 () 90+
- Are you currently eligible to re-enter the last college or university attended? () Yes () No
- What is your OVERALL college grade point average? () 2.0 or above () below 2.0

DEMOGRAPHIC INFORMATION

(This information is **voluntary** and will be used in a nondiscriminatory manner, consistent with applicable civil rights laws.)

Gender: () Male () Female () Prefer not to respond

Ethnicity & Race: In order to comply with federal regulations, educational institutions are required to collect information on students' ethnicity and race for reporting purposes. This data is reported as total aggregate numbers and personal information is not shared. Please help us comply with these regulations by specifying whether you are of Hispanic or Latino descent and then select one or more of the races with which you identify yourself.

Are you of Hispanic/Latino ethnicity or decent? () Yes () No

Select one or more of the following races that you consider yourself to be:

- () American Indian or Alaska Native () Asian () White () Black or African American
 () Native Hawaiian or Other Pacific Islander () Other: _____

ADDITIONAL INFORMATION

Residency Information: Failure to complete each question fully may result in non-resident classification.

**** Is English your native language?** ____ Yes ____ No

- Are you a U.S. citizen? (check one)
 () U. S. Citizen () Alien Permanent (submit copy of I-55/Green Card) () Alien Temporary (submit copy of I-55/I-94)
 () Non U.S. Citizen: Visa Type:_____ Permit Date: _____ Country of Citizenship:_____
 () Seeking a Student Visa

- Have you lived in Louisiana for the past 2 continuous years? () Yes () No

If **no**, then complete the following:

Prior City, State & County of residence prior to moving to Louisiana: _____

Dates resided in Louisiana: _____ to _____

Dates resided in Louisiana: _____ to _____

- Are you a dependent of your parent(s)?** () Yes () No

If yes, list dates parents have resided in LA: _____

- Are you married to a Louisiana resident?** () Yes () No
- Are you a United States Veteran?** () Yes () No
- Are you a spouse or dependent of a U.S. Veteran?** () Yes () No
- Are you, your spouse, or your parent currently on active military assignment?** () Yes () No
 If yes, indicate who is on active military assignment: () Self () Parent () Spouse () Legal Guardian

Additional Information continued:

1. Have you ever been suspended or dismissed from any college or university for scholastic reasons?
() Yes () No
2. Have you ever been suspended or dismissed from any college or university for conduct reasons?
() Yes () No
3. Have you ever been convicted of stalking, cyberstalking, rape or sexual battery?
() Yes () No

If "yes" your admission counselor will be in contact with the additional documentation required before an admission decision can be determined.

EDUCATIONAL GOALS

Which statement best describes your educational goals at LSUA?

Choose ONE:

- () 1. I wish to seek a degree at LSUA (please list your desired major below, if unknown put Undecided)

(a). Major: _____

A list of majors can be found at <https://www.lsua.edu/academics/programs>.

- (b). Do you wish to take this major 100% online? () Yes () No

***Not all majors are available 100% online. If the major listed is not available online your application will be processed as an on-campus student.**

- () 2. I wish to be non-degree seeking student at LSUA (select one): () Visiting () POST () Audit Only

- () 3. I wish to take classes at LSUA while in high school (Dual Enrollment)

Have you filled in each blank and signed your application?

Incomplete, unsigned, and/or unpaid applications cannot be processed and will be returned to the applicant for completion prior to processing.

I certify that to the best of my knowledge the information given is correct and complete. I understand that if it is later found otherwise, my application may be invalid, or in the event that I am enrolled, I will be subject to dismissal from the university. I understand that it is my responsibility to submit all official transcripts required for admission and that failure to do so will result in my dismissal from the university. I agree to abide by all university regulations as stated in the LSUA Catalog and LSUA's Student Handbook. I do hereby authorize Louisiana public post-secondary education access to my academic records.

LSUA works together with LSUE and CLTCC to offer developmental and beginning college-level courses to those students who do not meet criteria for regular admission to LSUA. In the event I do not meet admissions criteria for LSUA, I authorize LSUA to send copies of my application materials to LSUE and CLTCC to pursue additional post-secondary options available to me.

By signing below, I am acknowledging my responsibility for all debt owed to the university. These charges include, but are not limited to, tuition, fees, books, housing, fines, meal plans, and any additional balance associated with my student account. Students are strongly encouraged to pay their account balance prior to the payment deadline for each semester in which they are enrolled. I understand that failure to pay in a timely manner may result in a \$75 late fee. I understand that I am responsible for dropping courses prior to the end of the 100% refund period to avoid charges. I agree that I am accountable for all course related fees associated with dropping courses after the refund deadline.

Student accounts not paid in full within 90 days after the end of the semester will be turned over the Louisiana Attorney General's Office and may be reported to credit bureaus. I agree that I am responsible for all costs associated with the debt and its collection, including attorney fees.

Signature _____

Date _____