

The University of Texas at Dallas
CHESS ONLINE APPLICATION FOR ADMISSION to UTD

ED4358: Chess I - Using Chess in Elementary Schools (undergraduate)
ED5344: Chess I - Chess in the Elementary School Curriculum (graduate)
ED4359: Chess II – Using Institutional & Cultural Contexts of Chess (undergraduate)
ED5345: Chess II – Institutional & Cultural Contexts of Chess (graduate)

NAME AND ADDRESS INFORMATION

1. US Social Security Number: _____
2. Date of Birth: Month ___ Day ___ Year _____
3. Legal Name: Last Name _____ First Name _____
Middle Name _____ Suffix _____ (Jr. etc.)
4. Other names which may appear on previous records: _____
5. Gender: Male Female
6. Place of Birth: City _____ State/Province _____
Country _____
7. Permanent Address:
Street _____ Apt/Box _____
City/Town _____ District _____
State/Province _____ Zip/Postal Code _____
Country _____ Phone Number _____
8. Current/Local Address:
Street _____ Apt/Box _____
City/Town _____ District _____
State/Province _____ Zip/Postal Code _____
Country _____ Phone Number _____
9. E-Mail Address: _____

10. Emergency Contact: Name (Last, First) _____

Contact Phone: _____ Relationship _____

EDUCATIONAL DATA

11. Expected Semester to take Chess Online course: Year _____ [] Fall [] Spring [] Summer

12. Applying as a (Check appropriate classification):

[] Former Student. Last semester attended: Year/Term _____

[] Temporary/Transient, for Chess Online only
semester _____

13 Major (current): _____

14. Are you seeking teacher certification? [] No [] Yes

Are you a Chess student? [] No [] Yes

Are you a Chess coach? [] No [] Yes

Are you a member of the U.S. Chess Federation? [] No [] Yes

15. High School Attended:

Name of HS _____

City _____ State/Province _____

Country (if other than the US) _____

16. Grades attended at this high school _____ Graduation Date _____

17. If you did not finish high school, do you have a GED? [] Yes [] No

If you have a GED, which version: [] English [] Spanish

18. Do you have a baccalaureate degree? [] Yes [] No

Do you plan to take a chess course for undergraduate credit? []
graduate credit? []

List ALL previous colleges/universities you have attended or are attending, including those for extension or correspondence credits. Failure to list all schools will be considered an intentional omission (academic dishonesty) and may lead to forced withdrawal.

Name of Institution Location (City/St.) From/To Dates Hours/Degree

19. Are you currently on academic suspension from a college or university?

Yes No

TEST INFORMATION

20. Texas residents must report TASP Status:

Passed, date taken _____

Not Taken, date plan to take _____

Exempt, based on ACT SAT TAAS

College courses before Fall 1989

PART B

Required for all applicants. Failure to complete, sign and date this portion will result in your application review being delayed.

CERTIFYING STATEMENT

21. I certify that the information I have provided is complete and correct to the best of my knowledge. If my application is accepted, I agree to abide by the policies, rules and regulations of The University of Texas at Dallas. I authorize the university to verify the information I have provided. I further understand that the information submitted herein will be relied upon by the officials of the university in determining my admission and residence status for tuition purposes, and that the submission of false information is ground for rejection of my application, withdrawal of acceptance, cancellation of enrollment, and/or disciplinary action. I authorize the university to electronically access my Texas Academic Skills Program (TASP) test results.

Applicant Signature _____

Date signed: _____

===== APPLICATION FEE INFORMATION =====

You may pay your application fee by check or money order.

Semester applied for _____, year _____ Application Fee: \$ _____

Method of Payment:

Check or money order included (be sure to indicate applicant's name and ID number on the check/money order for easy matching)

Please contact Michele Dunavin at (972) 883-2057 or email dunavin@utdallas.edu for assistance.

===== PART C =====

(Not applicable to international applicants)

PERSONAL INFORMATION (Required for state and federal reports)

23. Please fill out your name and Social Security Number for proper matching of records with other parts of the application.

Last Name _____ First Name _____

Social Security Number _____

Do you wish to receive information concerning services for persons with disabilities? Yes No

Ethnic background (will not affect your application process):

American Indian or Alaskan Native (N)

Asian or Pacific Islander (A)

African American (B)

Hispanic or Latino (H)

White, non-Hispanic origin (W)