Application for Undergraduate Admission
Readmission and Nondegree Students

Nondegree Admissions

A nonrefundable application fee of $45 is required with this application for all nondegree applicants. Applicants who wish to attend the University for one semester or for up to 18 credit hours may be approved to do so upon submitting this application. The Office of Admissions reserves the right to determine the proper category of admission. Applications must be approved prior to the first day of the semester. Enrollment will not be permitted after classes are in session. Students in a nondegree status are not eligible for financial aid.

Students will be required to complete a new Application for Undergraduate Admission (Readmission and Nondegree Students) and submit the required processing fee if they are not continuously enrolled during the regular fall and spring semesters (excludes summer terms).

- **Transient Students** are students who wish to take courses at Coastal Carolina University while regularly enrolled in another “home” institution. Students are responsible for securing approval from the Academic Dean or University Registrar at their “home” institutions. Transient students are eligible to apply for on-campus housing during summer sessions only. For more information, contact the Office of University Housing, 843-349-6400.

- **Pre-College High School Students** may be eligible to begin college studies on a course availability basis while concurrently enrolled in high school. Pre-college applicants must provide a high school transcript with a minimum B+ average through the junior year and acceptable PSAT, SAT or ACT scores, along with a letter of recommendation from a high school counselor or principal.

- **Adult Learners** are applicants who seek to enroll in courses for personal or professional enhancement and who are at least 22 years old. At the completion of 18 credit hours, it is required that the student apply for degree-seeking status by submitting a new Application for Undergraduate Admission, accompanied by official transcripts from all previously attended institutions.

NOTE: Senior citizens (age 60 or older) who are legal residents of South Carolina and who are not employed full time may be eligible to attend classes on a space available basis without the payment of tuition (excludes required course fees), provided the applicant meets the admission requirements and other standards of the University. Senior citizens may register for classes under the free tuition provision the day prior to the first day of class for the current term. The senior citizen must complete either the Nondegree or Degree-Seeking Undergraduate Application depending on the status of enrollment that is desired. In addition, the Free Tuition Application for Senior Citizens must be completed and submitted to the Office of Admissions.

Earning a Degree at Coastal Carolina University

Students who wish to earn a degree from Coastal Carolina University must complete the Undergraduate Application for Degree-Seeking Students and submit the required application fee and transcripts. The application can be completed online at: coastal.edu/admissions/apply.html.
Thank you for your interest in attending Coastal Carolina University! Once your application is complete (including submission of official transcripts), you should hear from us regarding your admission status within three weeks. Again, thank you for choosing Coastal Carolina University.

**ITEMIZED INSTRUCTIONS**

- **Item 3 SOCIAL SECURITY NUMBER**
  Please double check your Social Security number. An incorrect number will delay processing of your application. This number will be used solely for the purpose of identification and ensuring accuracy in the processing of this application.

  Federal law recognizes the student Social Security number (SSN) as personally identifiable information under the Family Education Rights and Privacy Act of 1974 (FERPA). However, the law permits Coastal Carolina University to request and use this information in compliance with state and federal guidelines. You are not required to provide an SSN to be considered for admission, but you are strongly encouraged to do so, if you have one.

  Providing an SSN will assist with matching records to your application, such as transcripts and test scores.

  **NOTE:** An SSN is required to apply for financial aid. If you plan to apply for financial aid, you are encouraged to provide your SSN on your admissions application to assist with financial aid processing later. Providing your accurate Social Security number will also help with citizenship verification.

- **Item 16 MAJOR** (for readmission of former Coastal Carolina University students only)
  All degree-seeking students must declare a major. Indicate one of the following choices on the application, Question 16. Please enter the code given.

**BUSINESS ADMINISTRATION**
- Accounting – ACCP
- Certified Public Accountant – CPA
- Certified Management Accountant/ Certified Financial Manager – CMAFA
- Economics – ECONP
- Finance – FINP
- Financial Management – FMGT
- Financial Services – FSRV
- Wealth Management – WMGT
- Hospitality, Resort and Tourism Management - HRTMP
- Management – MGTP
- Entrepreneurial Management – EM
- General Management – GEN
- Human Resources Management – HRM
- International Management – IM
- Operations and Technology Management – OTM
- Organizational Leadership – OL
- Marketing – MKTP

**EDUCATION**
- Early Childhood Education (PreK-3) – ECEDP
- Elementary Education (2-6) – ELED
- Middle Level Education (5-8) – MGEDP
- Math – MATH
- Science – SCIE
- Social Studies – STST
- English – ENGL
- Physical Education (K-12) – PHED
- Special Education-Learning Disabilities (PreK-12) – SPEDP

Coastal Carolina University offers a graduate level Master of Arts in Teaching (M.A.T.) program in the areas of:
- Art – ARTS
- English – ENGL
- Mathematics – MATH
- Music – MUSP
- Science – SCIE

**HUMANITIES and FINE ARTS**
- Art Studio – ARTS
- Communication – COMM
- Communication Studies – CSTD
- Health Studies – HCOM
- Interpretive Journalism – IOUJ
- Public Relations/Integrated Communication – PRCOM
- English – ENGL
- Graphic Design – GDDES
- History – HIST
- Intelligence and National Security Studies – INTEL
- Music – MUSP
- Musical Theatre – MUTHP
- Philosophy – PHIL
- Political Science – PSCI
- Domestic Politics – DPOL
- Global Politics – GPOL
- Theatre Arts – TARPT
- Acting – ACT
- Design and Technology – DTCH
- Physical Theatre – PTHH

  *All students who desire to pursue a bachelor of arts (B.A.) degree in music must successfully complete an audition. For more information, go to coastal.edu/music.*

  **All students who desire to pursue a bachelor of fine arts (B.F.A.) degree in theatre arts or musical theatre must successfully complete an audition. For more information, go to coastal.edu/theatre.*

**INTERDISCIPLINARY STUDIES**
- Interdisciplinary Studies – INTSP

**UNDECLARED**
- Undeclared – UNUG

**PRE-PROFESSIONAL MAJORS**
- Pre-Allied Health/Biology – AH
- Pre-Dental/Biology – DT
- Pre-Law/Political Science – LW
- Pre-Medical/Biology – MD
- Pre-Pharmacy/Biology – PH
- Pre-Physical Therapy/Biology – PT
- Pre-Veterinary/Biology – VT

**SCIENCE**
- Biochemistry – BCHM
- Biology – BIOL
- Cellular, Molecular Biology and Genetics – CMGH
- Ecology, Evolution and Conservation Biology – EECO
- Integrative Biology – IBIO
- Chemistry – CHEM
- Computer Science – CSCI
- Dual Degree Engineering (3+2 Dual Degree Program with Clemson University)
- Exercise and Sport Science – EXSS
- Health Administration – HADM
- Health Promotion – HLPR
- Information Systems – INFYS
- Information Technology - IT
- Marine Science – MSCIO
- Mathematics (applied) – MATHA
- Nursing - NUR
- Physics (applied) – PHYSA
- General – GEN
- Environmental Physics – ENVPH
- Engineering Physics – ENGPH
- Psychology – PSYC
- Recreation and Sport Management – RSM
- Recreation Management – RMGT
- Sociology – SOC
- Generalist – GEN
- Criminology – CRIM
- Social Justice – SJUS

**PGMP**
- Organizational Leadership – OL
- General Management – GEN
- Entrepreneurial Management – EM
- Management – MGTP
- Hospitality, Resort and Tourism Management - HRTMP
- Healthcare Management – HCMD
- Health Administration – HADM
- Health Promotion – HLPR
- Information Systems – INFYS
- Information Technology - IT
- Marine Science – MSCIO
- Mathematics (applied) – MATHA
- Nursing - NUR
- Physics (applied) – PHYSA
- General – GEN
- Environmental Physics – ENVPH
- Engineering Physics – ENGPH
- Psychology – PSYC
- Recreation and Sport Management – RSM
- Recreation Management – RMGT
- Sociology – SOC
- Generalist – GEN
- Criminology – CRIM
- Social Justice – SJUS
1. PLEASE CHECK ONE:
   - READMISSION ($15), LAST TERM YOU ATTENDED COASTAL CAROLINA UNIVERSITY _______________________________ (SEMESTER AND YEAR)
   - TRANSIENT ($45)
   - PRE-COLLEGE ($45)
   - ADULT LEARNER ($45)
   - SENIOR CITIZEN ($45)
   - AUDIT ($45)
   - TEACHER CADET ($45)

2. I WISH TO BEGIN MY STUDIES AT COASTAL CAROLINA UNIVERSITY. Check one, list year (yy) in the blank.
   - Fall Semester _________
   - Spring Semester _________
   - Maymester _________
   - Summer I Session _________
   - Summer II Session _________

3. SOCIAL SECURITY NUMBER ___________________ – ____________ – ___________________
   (REQUIRED FOR U.S. CITIZENS OR PERMANENT RESIDENTS APPLYING FOR FINANCIAL AID.)

4. NAME
   LAST ___________________________________________
   FIRST ___________________________________________
   MIDDLE ____________________________________________
   SUFFIX (JR., III, IV) ____________________________

5. MAIDEN OR FORMER NAME USED AT OTHER COLLEGES ___________________________________________________________

6. HOME/PERMANENT ADDRESS
   P.O. BOX, RFD, STREET ___________________________________________
   CITY ___________________________________________
   STATE ___________________________
   ZIP CODE ___________________________
   COUNTY _______________________________________________________
   IS YOUR MAILING ADDRESS THE SAME AS YOUR PERMANENT ADDRESS?  ☐ YES  ☐ NO
   MAILING ADDRESS IF DIFFERENT FROM PERMANENT/HOME ADDRESS
   P.O. BOX, RFD, STREET ___________________________________________
   CITY ___________________________________________
   STATE ___________________________
   ZIP CODE ___________________________
   COUNTY _______________________________________________________

7. HOME TELEPHONE (__________) ______________________  8. CELL TELEPHONE (__________) ______________________

☐ I GIVE PERMISSION TO COASTAL CAROLINA UNIVERSITY TO SEND ME IMPORTANT UPDATES VIA TEXT MESSAGING. (Standard message rates and charges apply.)

EMAIL ADDRESS ________________________

9. I AM AN INTERNATIONAL STUDENT.  ☐ YES  ☐ NO
   If you selected “Yes”, please stop working on this application and complete our International Undergraduate Application instead. You can find the online version of the International Undergraduate Application at coastal.edu/admissions/apply.html. You will also find a link to print a paper version of the International Undergraduate Application.

COUNTRY OF BIRTH ___________________________________________
COUNTRY OF CITIZENSHIP ___________________________________________
I AM A PERMANENT RESIDENT OF THE UNITED STATES.  ☐ YES  ☐ NO
ALIEN REGISTRATION NUMBER _________________________________
   (include a copy of Green Card)

10. DATE OF BIRTH (mm/dd/yy) ___________________________

11. GENDER  ☐ MALE  ☐ FEMALE

12. MILITARY VETERAN/ACTIVE MILITARY
   ARE YOU CURRENTLY OR HAVE YOU EVER BEEN A MEMBER OF THE U.S. ARMED FORCES?  ☐ YES  ☐ NO
   If YES, please check one of the following:  ☐ Active duty  ☐ Active reserve  ☐ Reserve component  ☐ Veteran
   ARE YOU THE SPOUSE OR A DEPENDENT OF A FULL-TIME MEMBER OF THE U.S. ARMED FORCES?  ☐ YES (SPOUSE)  ☐ YES (DEPENDENT)  ☐ NO
   ARE YOU SEEKING READMISSION TO THE UNIVERSITY AFTER HAVING BEEN CALLED UP TO ACTIVE MILITARY SERVICE THROUGH THE RESERVES OR DRAFTED BEFORE THE END OF YOUR LAST SEMESTER?  ☐ YES  ☐ NO

13. ETHNIC ORIGIN / RACE
   I AM HISPANIC OR LATINO.  ☐ YES  ☐ NO
   WHAT IS YOUR RACE? Regardless of your answer to the previous question, please mark one or more races to indicate what you consider yourself to be.
   ☐ AMERICAN INDIAN OR ALASKA NATIVE  ☐ ASIAN  ☐ BLACK OR AFRICAN AMERICAN  ☐ NATIVE HAWAIIAN OR PACIFIC ISLANDER  ☐ WHITE
14. FAMILY CONTACT INFORMATION (CHECK RELATIONSHIP TO YOU) ☐ PARENT ☐ SPOUSE ☐ GUARDIAN ☐ OTHER __________________________

NAME LAST __________________________ FIRST __________________________ MIDDLE __________________________ SUFFIX (JR., III, IV) __________________________

HOME/PERMANENT ADDRESS: • P.O. BOX, RFD, STREET __________________________

CITY __________________________ STATE ______ ZIP CODE ___________ ZIP + FOUR _________

HOME TELEPHONE (__________) __________________________ WORK TELEPHONE (__________) __________________________

CELL TELEPHONE (__________) __________________________

EMAIL ADDRESS __________________________

15. I PLAN TO ATTEND CLASSES ☐ Full time ☐ Part time

16. MAJOR __________________________ Specialization, if applicable __________________________. (For readmission of former Coastal Carolina University students only.)

17. DO YOU CLAIM RESIDENCY IN SOUTH CAROLINA FOR PURPOSES OF IN-STATE TUITION? ☐ Yes ☐ No If YES, you must complete one of the residency forms on the back of this application.

Complete the Dependent Residency Information Form on page 4 if you RECEIVE more than half our your support from a parent, guardian or spouse.

Complete the Independent Residency Information Form on page 5 if you PROVIDE more than half of your support and you will NOT be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.

If all questions are not answered completely, you will be considered an OUT-OF-STATE student for tuition and fee purposes.

ACADEMIC HISTORY

18. HIGH SCHOOL FROM WHICH YOU WILL GRADUATE OR GRADUATED: (for Pre-College High School Students only)

Name of high school __________________________ State ______ CEEB HS Code ______ Years attended (yyyy to yyyy) ______

19. COLLEGES ATTENDED: Have you attended any college, either full time or part time, since graduation or taken any college-level courses while in high school?

If yes, please list below all colleges attended, current or most recent first, and ask the institution(s) to forward an official transcript of your work directly to the Office of Admissions, Coastal Carolina University.

Name of school (full name) __________________________ State ______ Credits earned ______ Date entered (mm/yy) ______ Date leaving (mm/yy) ______

Name of school (full name) __________________________ State ______ Credits earned ______ Date entered (mm/yy) ______ Date leaving (mm/yy) ______

Name of school (full name) __________________________ State ______ Credits earned ______ Date entered (mm/yy) ______ Date leaving (mm/yy) ______

Have you earned an Associate of Arts or an Associate of Science degree? ☐ Yes ☐ No

20. COMMUNITY STANDARDS

All applicants are required to complete responses to a series of community standard questions on the application for admission. Responses to these questions are initially reviewed by the Office of Admissions, and some cases are referred to the Community Standards Committee for review. An applicant must be approved by the community standards review process prior to being admitted to the University. This community standards review process supports the University’s goal of maintaining a safe learning community. Failure to submit complete responses and/or falsification of responses may result in revocation of the admission decision or dismissal if the false information or incomplete response is discovered after enrollment.

Any incident resulting in any change to a community standards question subsequent to the application must be immediately reported by the applicant to the Office of Admissions in writing. Effective June 1, 2009, Coastal Carolina University will not permit Registered Sex Offenders to enroll in classes or participate in campus activities. Additionally, failure to disclose registration shall result in immediate expulsion and revocation of any privileges as a student.

If you answer “yes” to any of the questions below, you are required to provide your own written explanation of the event(s), a copy of the police incident and arrest report, and/or a statement from an appropriate official summarizing the event(s) and the final disposition of your case. If you are not/were not represented by legal counsel in connection with the event(s), in addition to your own written explanation, you must also provide court records summarizing the event(s) and the final disposition of your case. If the incident occurred while you were at Coastal Carolina University, please include this information in your written explanation. Print your full name at the top of each page, and date and sign each page. All documentation must be mailed to the Office of Admissions.

1. ☐ Yes ☐ No Have you been adjudicated, processed, involved in pretrial diversion or entered into a contract through juvenile court, or arrested without a conviction in which the record has not been expunged?

2. ☐ Yes ☐ No Have you ever been pardoned in any court? If so, please provide details as to the crime and conviction in which the record has not been expunged.

3. ☐ Yes ☐ No Have you ever entered into any pretrial diversion program as an adult in which the record has not been expunged?

4. ☐ Yes ☐ No Have you been convicted of a crime as an adult or juvenile?

5. ☐ Yes ☐ No Have you entered a plea of guilty, a plea of no contest, a plea of “nolo contendere,” an Alford plea, or a plea of delinquency in juvenile court, or have you received a deferred prosecution or prayer for judgment continued to a criminal charge?

6. ☐ Yes ☐ No Have you otherwise accepted responsibility for the commission of a crime or entered a pre-trial/diversion program?
7. □ Yes □ No  Do you have any criminal charges pending against you?

8. □ Yes □ No  Have you ever been assigned or received out-of-school suspension (OSS) or been expelled from high school, or placed on disciplinary probation or suspension by any college or university? This may include, but is not limited to, academic cheating, conduct violations, or alcohol policy infractions. If you answer “yes,” you are required to attach a statement from an appropriate school official corroborating your summary of the event in addition to your own explanation of the event.

9. □ Yes □ No  If you served in the military, did you receive any type of discharge other than an honorable discharge? If you have not served in the military, respond “No.”

Written statement (required for all “yes” responses):

__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

21. If you have been separated from high school or college for more than six months or one term, please explain how you have been using your time.

__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

22. APPLICATION AGREEMENT

I certify that these responses are true and complete to the best of my knowledge, pursuant to reasonable inquiry where needed, and I am aware that any knowing omissions or falsifications herein may result in disciplinary action including denial of admission or dismissal after admission. Further, it is my understanding that I shall not be considered for admission to the University until I have submitted all credentials. I agree to inform the Office of Admissions in writing of any change in my plans to attend the University and any change to my responses to questions on this application. I understand that if I discontinue my enrollment in a major term at Coastal Carolina University at any time, I must submit a new application by the appropriate deadline. I also understand that the provision of my Social Security number and my ethnicity/racial origin are not required to be considered for admission to the University.

My signature below is my promise that, should I enroll at Coastal Carolina University, I will abide by all rules and policies of the Code of Student Conduct and Academic Responsibilities as outlined in the University’s Student Handbook. A copy of the handbook can be found at coastal.edu/deanofstudents. Failure to truthfully disclose information may subject me to immediate expulsion.

Signature of Applicant ___________________________ Date ___________________________

Signature of Parent or Legal Guardian ___________________________ Date ___________________________

(if applicant is under 18 years of age)

APPLICATION FEE: Credit card authorization for payment of the application fee  (Complete this section only if you are paying the application fee by credit card. Please PRINT clearly.)

I authorize the use of my credit card account. AMOUNT: ____________________________ Please check the appropriate card: □ MasterCard □ Visa □ Discover □ American Express

Name (as it appears on credit card) ____________________________

Signature ____________________________ Date ____________________________

Daytime telephone ( _________ )

16-digit Credit Card Number ____________________________ – ____________________________ – ____________________________ – ____________________________ Expiration date ____________________________ – ____________________________

Residents of the State of South Carolina are required to complete ONE of the residency information forms on page 4 or 5 of this application. If you do not provide this information, you will be classified as an out-of-state student for tuition and fee purposes.

(Rev. 102014)
DEPENDENT - RESIDENCY INFORMATION FORM

Applicants who claim South Carolina residence for tuition and fee purposes must complete this form in its entirety. Additional information may be requested per SC Law 59-112. South Carolina residency requirements may be found online at che.sc.gov.

Student Information

Name of student ________________________________________________________________

Social Security Number or CCU ID _______________________________________________

Age _____________ Date of birth (mm/dd/yy) _______/_______/_________ City and State of birth ______________________________________________

Residency Information

You have indicated that you are a current high school student or a dependent of a parent, guardian or spouse; please enter your parent’s/guardian’s/spouse’s information below. A dependent student is defined as one who will receive more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment from a parent, guardian or spouse, and will be claimed as a dependent or exemption on that individual’s income tax returns.

WITH WHOM DO YOU RESIDE? □ Self □ Both parents □ Father □ Mother □ Other ____________________

WHO CLAIMS YOU FOR FEDERAL INCOME TAX PURPOSES? □ Self □ Both parents □ Father □ Mother □ Other ____________________

PARENTS MARITAL STATUS: □ Single/never married □ Married □ Divorced/separated □ Widowed □ Re-married ________________

IF PARENTS ARE DIVORCED OR SEPARATED, WHO IS THE CUSTODIAL PARENT? □ Not applicable □ Father □ Mother □ Shared custody ____________________

NAME OF PERSON WHO PROVIDES THE MAJORITY OF YOUR FINANCIAL SUPPORT

First name _______________________________________ Last name _________________________________ Relationship ___________________

CITIZENSHIP: □ U.S. citizen □ Permanent Resident □ Not a U.S. Citizen or Permanent Resident

HOW LONG HAS PARENT/GUARDIAN/SPouse RESIDED IN SOUTH CAROLINA? Years ____________ Months ____________

ADDRESS (Street, City, State, Zip code) _____________________________________________________________________________________________

DRIVER’S LICENSE:

State ______________ Date issued ______________ □ New (first issued) □ Renewed Expiration date (mm/dd/yy) ______________

VEHICLE REGISTRATION:

State ______________ Date issued ______________ □ New (first issued) □ Renewed Purchase date (mm/dd/yy) ______________

DO NOT OWN A VEHICLE: □

IF YOUR PARENT/GUARDIAN RELOCATED TO SOUTH CAROLINA, WHAT WAS THE PREVIOUS STATE OF RESIDENCE? ____________________

EMPLOYMENT STATUS: □ Full time □ Part time □ Unemployed □ Retired □ Disabled

Employer name _______________________________________________________________ Telephone ( __________ ) ________________________

Employer address _____________________________________________________________________________________________________________

Employment Dates: From (mm/yy) __________ / __________ To (mm/yy) __________ / __________

IF YOUR CLAIM TO SOUTH CAROLINA RESIDENT STATUS IS BASED UPON ACTIVE MILITARY ASSIGNMENT TO THE STATE, PLEASE SUBMIT A COPY OF CURRENT ORDERS TO THE OFFICE OF ADMISSIONS.

Branch of Service: □ USAF □ USA □ USN □ USMC □ USCG Home of record on L.E.S. ____________________

I certify that all information provided is accurate and complete. I further understand that falsification or failure to provide the correct information may lead to the disqualification of my application for admission to Coastal Carolina University.

Signature of parent/guardian/spouse ____________________________________________________________________ Date ____________________
INDEPENDENT - RESIDENCY INFORMATION FORM

Applicants who claim South Carolina residency for tuition and fee purposes must complete this form in its entirety. Additional information may be requested per SC Law 59-112. South Carolina residency requirements may be found online at che.sc.gov.

Student Information

Name of student ______________________________________________________________________________________________________________________________

Social Security Number or CCU ID _____________________________________________________________

Age _____________ Date of birth (mm/dd/yy) ________ / _______ / __________ City and State of birth __________________________________________

Residency Information

An INDEPENDENT student is defined as one who will provide more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment and will NOT be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.

<table>
<thead>
<tr>
<th>CITIZENSHIP:</th>
<th>U.S. citizen</th>
<th>Permanent Resident</th>
<th>Not a U.S. Citizen or Permanent Resident</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HOW LONG HAVE YOU RESIDED IN SOUTH CAROLINA?</th>
<th>Years __________</th>
<th>Months __________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Street, City, State, Zip code)</th>
<th>__________________________________________________________________________________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>YOUR MARITAL STATUS:</th>
<th>Single/never married</th>
<th>Married</th>
<th>Divorced/separated</th>
<th>Widowed</th>
<th>Re-married</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CURRENT RESIDENCE:</th>
<th>Rent/lease</th>
<th>Own</th>
<th>With parents</th>
<th>Campus residence</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>WHO CLAIMS YOU FOR FEDERAL INCOME TAX PURPOSES?</th>
<th>Self</th>
<th>Both parents</th>
<th>Father</th>
<th>Mother</th>
<th>Other _________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DRIVER'S LICENSE:</th>
<th>State</th>
<th>Date issued</th>
<th>New (first issued)</th>
<th>Renewed</th>
<th>Expiration date (mm/dd/yy)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>VEHICLE REGISTRATION:</th>
<th>State</th>
<th>Date issued</th>
<th>New (first issued)</th>
<th>Renewed</th>
<th>Purchase date (mm/dd/yy)</th>
</tr>
</thead>
</table>

DO NOT OWN A VEHICLE: 

IF YOU HAVE RELOCATED TO SOUTH CAROLINA, WHAT WAS YOUR PREVIOUS STATE OF RESIDENCE? ______________________

<table>
<thead>
<tr>
<th>EMPLOYMENT STATUS:</th>
<th>Full time</th>
<th>Part time</th>
<th>Unemployed</th>
<th>Retired</th>
<th>Disabled</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employer name</th>
<th>__________________________________________________________________________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer address</td>
<td>__________________________________________________________________________________________________</td>
</tr>
</tbody>
</table>

Employment Dates: From (mm/yy) __________ / __________ To (mm/yy) __________ / __________

IF YOUR CLAIM TO SOUTH CAROLINA RESIDENT STATUS IS BASED UPON ACTIVE MILITARY ASSIGNMENT TO THE STATE, PLEASE SUBMIT A COPY OF YOUR CURRENT ORDERS TO THE OFFICE OF ADMISSIONS.

Branch of Service: USAF USA USN USMC USCG Home of record on L.E.S. ______________________

| I hereby certify that the information I have provided is accurate and complete. I further understand that falsification or failure to provide the correct information may lead to disqualification of my application for admission to Coastal Carolina University. By signing below, I acknowledge this information will be used to determine South Carolina residency status for tuition and fee purposes. |

Signature of applicant ___________________________________________________________________________ Date __________________________