

FORMER STUDENT APPLICATION

Last Name	First Name	MI	Social Security Number	Birthdate
Previous Name(s)	E-Mail Address			Lived In MT Past 12 Months Yes____ No____
	Phone (Home)		Phone (Local)	
	Major		Male____ Female____	
Street Address (Home)		City	State	Zip
Street Address (Local)		City	State	Zip
Dates Attended MSU-Billings/EMC				Are You In Good Standing At Your Previous College Yes____ No____
List All Other Colleges Since Last Term at MSU-Billings City/State Dates Attended (To-From)				
				Undergraduate ____ Graduate ____
Please Indicate If You Are:				Term Next Attending: (Check One) ____ Fall ____ Spring ____ Summer
African American____		American Indian or Alaska Native____	Asian or Pacific Islander____	
Hispanic____		Reservation____	Caucasian____	
REQUIRED SAFETY AND SECURITY INFORMATION				
Have you ever been subject to discipline, suspension or probation at any institution of post secondary education (beyond high school) for reasons not related to academic performance? [] Yes [] No				
Have you ever been convicted of a criminal offense involving physical injury to persons or property or otherwise institutionalized for conduct causing physical injury to person or property? [] Yes [] No				
Signature			Date	

Please print this out and fax it to (406) 657-2302 or mail it in to:

Admissions and Records
MSU-Billings
1500 University Drive
Billings, MT 59101