University of Pittsburgh
Johnstown

ADMISSION DATA FORM

In order to complete the admission process, the Admission Data Form, including your deposit, must be submitted.

NAME (Last, First, M.I.)

SOCIAL SECURITY NUMBER
☐ ☐ ☐ — ☐ ☐ — ☐ ☐ ☐ ☐

PERMANENT ADDRESS (LINE 1)

PERMANENT ADDRESS (LINE 2) | CITY | STATE | ZIP CODE

AREA CODE, TELEPHONE NUMBER
( )

AREA CODE, CELL PHONE NUMBER
( )

PARENT'S E-MAIL ADDRESS

FOREIGN ADDRESS (Country, Zip, City, Province)

DATE OF BIRTH (mm/dd/yyyy) / /

SEX ☐ FEMALE   ☐ MALE

PLEASE ANSWER ALL QUESTIONS

Where are you planning to reside? ☐ ON CAMPUS (1) ☐ COMMUTE (2) ☐ OFF CAMPUS (3)

What is your citizenship status? ☐ U.S. Citizen ☐ U.S. Immigrant/ Permanent Resident Alien ☐ Refugee ☐ Nonimmigrant

Are you a resident of Pennsylvania?

If yes, for more than one year or less than one year?
(Count back from the beginning of the term for which you are enrolling.)

☐ No, not a PA Resident
☐ Yes, less than one year
☐ Yes, more than one year

Is your father a resident of Pennsylvania?

If yes, for more than one year or less than one year?
(Count back from the beginning of the term for which you are enrolling.)

☐ No, not a PA Resident
☐ Yes, less than one year
☐ Yes, more than one year

Is your mother a resident of Pennsylvania?

If yes, for more than one year or less than one year?
(Count back from the beginning of the term for which you are enrolling.)

☐ No, not a PA Resident
☐ Yes, less than one year
☐ Yes, more than one year

Is your guardian a resident of Pennsylvania?

If yes, for more than one year or less than one year?
(Count back from the beginning of the term for which you are enrolling.)

☐ No, not a PA Resident
☐ Yes, less than one year
☐ Yes, more than one year

I recorded the above. The information given is true and correct. I understand that falsification of any data may result in dismissal. I authorize any employer, educational institution, or agency to release such data as is required by the University to verify any of the above information. By signing below, I also authorize the University of Pittsburgh to request and, my high school and/or testing agencies to release, any academic information or college entrance test results needed to make my admissions file complete.

Date   Student's Signature

Do not write in shaded area.

ENROLLMENT DEPOSIT FORM

STUDENT'S NAME (Last, First, M.I.)

DATE RECEIVED (mm/dd/yy) / /

DEPARTMENT NAME
Office of Admissions

UNIVERSITY TELEPHONE EXT.
814-269-7050

ENROLLMENT DEPOSIT
(Nonrefundable/Nontransferable)

AMOUNT

DEPOSIT FOR TERM

TOTAL AMOUNT RECEIVED IN

☐ Check ☐ MC

☐ Money Order ☐ Visa

Please Make Checks Payable To:
University of Pittsburgh at Johnstown

$100.00

$ ☐ ☐ ☐ ☐

To protect customer information:
All credit card payments must be made securely either online at
http://psmobile.pitt.edu/ or via phone by calling the Admissions Welcome Center at 814-269-7050, or toll free at 855-LIKE-UPJ

Thank you