

Texas A&M International University Office of Admissions

| For Office Use Only | |
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| CWID | - |

5201 University Boulevard, Laredo, Texas 78041-1900

Collaborative Programs Processing Form

| This form is solely for students admitted to or currently pursuing a graduate or doctoral program that is a collaboration between |
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| an A&M System institution and Texas A&M International University (TAMIU). |

- Applicants are processed as non-degree seeking students at Texas A&M International University (TAMIU).
- Financial aid from TAMIU is not available for these collaborative programs, as TAMIU is not the degree granting institution.

| Select program: ☐ Ph.D. in English ☐ Ph.D. in Educational Administration | Ph.D. in Hispanic Son Communication Sc | Studies ciences and Disorder Co | Ph.D. in Curriculum and Instruction onsortium | | | |
|--|--|----------------------------------|---|--|--|--|
| 1. □ Male □ Female | ☐ Male ☐ Female 2. Social Security number: | | | | | |
| 3. Legal name: | | | | | | |
| Last (family | name) | First | Middle | | | |
| 4. Other names which may appear on a | cademic records: | | | | | |
| 5. Permanent home address: | | | | | | |
| City: | State: | ZIP: | Country: | | | |
| 6. Local/mailing address (if different): | | | | | | |
| | | | Country: | | | |
| 7. Telephone-home: | mobile: | office: | | | | |
| 8. E-mail: | _ | | | | | |
| 9. Place of birth: | | 10. Date of birth: _ | | | | |
| (city, state, c | country) | | | | | |
| 11. Please list the colleges or universitie | es you have attended: | | | | | |
| College or University Name | City, State, Country | Dates Attended | Hrs. Completed/Degree Earned | | | |
| | | | | | | |
| 12. Are you a resident of Texas? □ Y | es □ No | | | | | |
| 13. During your last semester at a Texa ☐ Resident (in-state) ☐ Non- | s public institution, did you p Resident (out-of-state) | | nonresident (out-of-state) tuition? | | | |
| 14. If you paid in-state tuition at your la Non-Texas Resident who received a wa | | • | a Texas Resident or because you were a sident with a waiver Unknown | | | |
| 15. I certify that this information is conregulations of Texas A&M International | | of my knowledge. I agre | ee to abide by the policies, rules, and | | | |
| Signature | | Date | | | | |

State law requires that you be informed of the following: (1) you are entitled to request that you be informed about the information collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.