



APPLICATION *for* ADMISSIONS

A non-refundable \$75 application fee is required for all applications for admission to VUST.

Personal Info

1. _____ / _____ / _____
Last Name First Name (only one please) Middle Name (if any)
2. Current Address: _____
Full Street or Postal Address

City State/Province Zip Code Country
3. Tel: (____) _____ E-mail: _____
4. Country of Birth: _____ Country of Citizenship: _____ Date of Birth: ____/____/____
mm dd yyyy
5. Check appropriate Male Female Single Married
6. Racial/Ethnic Background:
 American Indian / Alaskan Native Hispanic Asian / Pacific Islander
 Black White Other (specify): _____
7. Are you a U.S. Citizen? Yes No If "Yes," then go to question #9
8. If you are currently in U.S. then specify your legal status: Resident Alien Asylee /Refuge: A#: _____
 Temporary Status: Visa Type /Expiry Date: ____/____/____
 Are you requesting a change of status to F-1 or M-1
9. Your Skype ID: _____
10. Emergency Contac Name: _____ Your Relationship: _____
Mailing Address: _____
Tel: _____ Email: _____

Program Info

11. Indicate below which program you are applying for (check only one)
- | | |
|--|--|
| ◆ Master of Science in Cybersecurity | ◆ Graduate Level Certificates Programs |
| <input type="checkbox"/> Cybersecurity Systems | <input type="checkbox"/> Operation & Information Assurance |
| <input type="checkbox"/> Information Assurance | <input type="checkbox"/> Cybersecurity Systems |
- Concentration Area: _____
- ◆ **Non-Degree (Non-Credit) Programs**
 Advanced Level English as a Second Language Program: Remedial Courses
12. Indicate your Attendance Plans: Full- time (9-12 credits) Part- time (less than 9 credits)
13. Indicate your choice of education method: Residential (on-campus study) Online Study Hybrid Study
14. When do you wish to begin classes? Year: 20_____ Quarter: Winter Spring Summer Fall
15. Is English your native Language? Yes No* if "No," then indicate your first language: _____

* See the "English Proficiency" requirement on the School Catalog, under the "Admission Requirements" section.

Academic Background

16. With the most recent first, please list all colleges, universities and professional schools you attended prior to VUST. If you earned a degree, then mark it in the last column with **A** for **Associates**, **B** for **Bachelors**, **M** for **Masters**, **D** for **Doctorate**, **P** for **professional certificate / Diploma**. If no degree was earned, then leave it blank.

Name of Institution	City, State / Country (if not USA)	Years Enrolled	Major	Degree Earned*

* For each institution attended, an official transcript or otherwise notarized copy is needed. International transcripts must be evaluated for U.S. equivalency by a recognized credential evaluator. See "Application Requirements" section of the School Catalog.

17. Are you bringing transferring credits from other institutions: No Yes, then complete "Transfer Credit Application Form."

18. List Certifications, Licensures, Awards, Professional membership you are currently holding. (Start with the most recent one)

Name of Document	Institution / Professional Organization Issued by	Issued Date	Expiry Date

19. Indicate your pro-social skills or any leadership activities you got involved:

- Student Government Student Clubs Tutoring Community Service
 Peer Mentoring Music Dance Football/Soccer
 Other leadership experience: _____
 Other skills you possess: _____

20. Have you ever been convicted of any felony or crime? No Yes (on a separate sheet, explain when, how, and what happened)

21. Are you or have you been under suspension or dismissal (academic, disciplinary): No Yes (then, attach an explanation)

Other Info

22. Are you requesting an accommodation arrangement? Please indicate type: Indicate
 Host Family Student Apartments Other (Specify) _____

23. How did you hear about VUST?
 _____ Name (if referred by a student) _____ Name of Agent (if referred by an Agent)
 Brochures VUST Mailing Internet Other (specify): _____

I certify under penalty of disciplinary action that all of the information given on this application is complete, and accurate. I agree to supply the university with supporting documentation related to my application, if I am requested to do so. I further certify that if I am admitted by VUST, I will observe the code of student conduct, university's academic and non-academic policies and procedures, and terms of conditions of enrollment.

Applicant Signature: _____
 Parent/Legal Guardian (if under 18 years of age)

Date: _____

Virginia University of Science & Technology (VUST) is a non-discriminatory institution and an equal opportunity employer.
Please mail your application package with all attachments to the address below:

2070 Chain Bridge Rd., Suite : G100, Vienna, VA 22182
 T: 703-298-5852 ❖ F: 703-992-0249 ❖ www.vust.us ❖ info@vust.us