

College Of Creative Studies Application

This form is part of your application for admission to the College of Creative Studies, University of California, Santa Barbara.

This is a PDF form that can be filled out using Adobe Reader.

Please read the instructions for completing and submitting this form at <http://www.ccs.ucsb.edu/admissions>

Answer as completely as possible.

Name: _____
LAST (FAMILY) FIRST MIDDLE

Current Address: _____
STREET ADDRESS

_____ CITY STATE ZIP

E-Mail Address: _____

Permanent Address: _____
STREET ADDRESS

_____ CITY STATE ZIP

Current Phone No: (____) _____

Permanent Phone No:(____) _____

Date of Birth: _____

Name of High School: _____

High School Grade Point Average: _____

Date of Graduation: _____

Major for which you are applying:

Art B.A.: (check emphasis)

Painting Sculpture Book Arts

Literature B.A.

Music Composition B.A.

Biology B.A.

Chemistry/Biochemistry B.A. Chemistry/Biochemistry B.S.

Computer Science B.S.

Mathematics B.A.

Mathematics B.S.

Physics B.A.

Physics B.S.

Quarter for which you are applying:

Fall Winter Spring Year : 20 _____

Have you applied to UCSB?* _____

Have you been accepted to UCSB? _____

Where else have you applied?

**This is a separate process that all applicants to CCS must complete.*

If currently attending UCSB:

Perm Number _____

Current Major _____

Total Units Completed _____

UCSB Grade Point Average _____

Choose one:

I wish to transfer my enrollment to Creative Studies

I wish to add a major in Creative Studies
(dual College enrollment)

If you have taken any of the tests offered by the College Entrance Examination Board, please list your scores:

S.A.T. Reading _____

S.A.T. Math _____

S.A.T. Writing _____

American College Test (ACT) score _____

S.A.T. Subject Exams

Subject _____ Score _____

Subject _____ Score _____

Subject _____ Score _____

List any other names (e.g. maiden name) that may appear on your records:

Please complete the following if you already have any college credit. List all colleges attended, and specify quarter (Q) or semester (S) system. Continue on a separate sheet if necessary. List Advanced Placement exams on a separate sheet*.

College _____

Dates Attended _____

Number of Units _____ Q S

College _____

Dates Attended _____

Number of Units _____ Q S

College _____

Dates Attended _____

Number of Units _____ Q S

Please write in the following information by hand:

Applicant's Signature _____

Social Security Number* _____

Date _____

Enclosures:

Letter of Intent

Work in Evidence of Talent

List of Advanced Placement Exams (on separate sheet, if applicable)

Letters of Recommendation (optional for Art and Literature)

from _____

from _____

from _____

*SSN disclosure on your CCS application is optional. However, it would help ensure the accuracy of our records, so please provide it unless you have a reason not to.

The University is required by federal law to report your SSN and other pertinent information to the Internal Revenue Service pursuant to the reporting requirements imposed by the Taxpayer Relief Act of 1997. The University will use the SSN you provide to verify the identity of each applicant, to link our admissions file with Financial Aid Office data, to link to the Payroll Office to verify amounts paid to students receiving research assistantships, and to link financial awards and admission data to registration histories and student records. This record-keeping system was established before January 1, 1975, pursuant to the authority of the Regents of the University of California under Article IX, Section 9 of the Constitution of the State of California. This notification is provided to you as required by the Federal Privacy Act of 1974.