

## **OFFICE OF ADMISSIONS**

## Application for Admissions and Exceptions Committee Review For Freshman Student

Applicant's Name (Family/Last Name) SSN:	(First Name)  Date of Birth		
Applying for (Year): $\square$ Fall	□ Spring	□ Summer I	□ Summer II
Degree Sought:	Major:		
☐ First Time College Freshman (0 hours)		er Freshman (any	hours up to 29 SCH)
At this time, you do not meet the published minimu University. Therefore, your file will need to be revice. The Committee will review your file of	iewed by the U	niversity Admissions	s and Exceptions
Please use the following checklist to insure that y  Application for Undergraduate Ac  Official high school transcript and  SAT/ACT or COMPASS scores  THEA scores	lmissions		pplicable
Note: Some folders may require additional documentation : Exceptions Committee Review.	for acceptance into	o the University, but not	for Admissions and
If you are granted provisional or conditional accepta academic counseling services to insure your educati	•	e required to partic	pate in tutoring and
(Please complete back page before For questions contact (956)326-2200, Fax. (956)326-219			
*******FOR OF	FICE USE	ONLY******	******
High School Information Graduation Date: Percentage in class:	Rank:	No. In Cla	
Test Scores  ACT SAT THEA or T-COMP Scores: W	OEFL R	 _ M Oth	ner
TSI Status  □ Passed all sections □ TSI satisfied	d □Exemp	ot:(TA	AAS, TAKS, ACT, SAT)
College/University overall GPA:	(for	r transfer freshman)	
Previously enrolled at TAMIU: ☐ Yes	If yes, last s	emester	□No
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## **STUDENT NARRATIVE**

Briefly explain your current academic situation and why you think you would do well at Texas A&M International University. (Please print legible or type a two- or three-paragraph answer.)		
Important: University Admissions & Exceptions Committ notified of the Committee's decision by mail within five wo		
Applicant's Signature: (UAEC-FFR/FR form revised on 10/14/2011)	Date:	