



Application for Admission

Desired Start Date: Aug/Sept Jan April 2016 2017 2018
 Other (describe) _____

Applications are due at least 5 days prior to trimester start date.

Personal and Contact Information: (Please Print Clearly or Type)

Name: _____ Male Female
Last First Middle

Address: _____
Street / PO Box

City State Zip Code Country

Phone: _____
Day Evening Cell

E-Mail: _____

DOB: ____ / ____ / ____ Marital Status: Single Married # Children ____
Mo Day Yr

Citizenship: _____ Visa Status: _____

How did you hear about USAeroTech? _____

Any previous of misdemeanors or felonies? Y N If yes, explain: _____

Education / Experience / Professional Information:

High School: _____
School Name

City State Year Graduated

Tech School: _____
School Name

City State Year Graduated Degree / Certification

College: _____
School Name

City State Year Graduated Degree / Certification

Other / Employer: _____
Name

City State Years from / to Degree / Certification

Scores: ACT: _____ SAT: _____ GPA's: High School: _____ College: _____

References:

1) Name: _____ Relationship: _____
Position / Title: _____ Years known: _____
E-Mail: _____ Phone #: _____

2) Name: _____ Relationship: _____
Position / Title: _____ Years known: _____
E-Mail: _____ Phone #: _____

3) Name: _____ Relationship: _____
Position / Title: _____ Years known: _____
E-Mail: _____ Phone #: _____

4) Name: _____ Relationship: _____
Position / Title: _____ Years known: _____
E-Mail: _____ Phone #: _____

Transcript & Application Fee

You must request a transcript from your most recent or last schooling and mail / fax it to USAeroTech Institute. Also, a \$25 application fee is required and must accompany this application. (This fee is non-refundable but applicable to your tuition fee when you are accepted.) Please make checks payable to: *“USAeroTech Institute.”*

Mail transcript, application and payment to: USAeroTech Institute
Attn: ADMISSIONS
8 Opportunity Place
Greenville, SC 29607

Thank you for your application! We will contact you within 2 weeks.

Admissions Office / Official Use Only: Student ID #: _____

Date Received ___/___/___ Received by: _____

Fee- Transcript- Reviewed- // Accepted- Excluded- Date Notified ___/___/___

Notes: _____