TEXAS CHRISTIAN UNIVERSITY RANCH MANAGEMENT PROGRAM CERTIFICATE PROGRAM APPLICATION

ABOUT YOU

Full Legal Name _						
	Last	First		Middle	Maiden	Jr., II, III
Preferred Name _		 	Emai	address		
Permanent Addre	ss					
		Street (Ave., St., Dr., e	etc.)		City / State / Zip	
Home Telephone	()	 <u></u>	-	Cell Phone (-
Mailing Address_						
		Street (Ave., St., Dr., e			City / State / Zip	
Effective From _	/	/ To				
				Date of Birth		
(IF DIFFERENT FROI	M ABOVE)					
Place of Birth				Native Language)	
	(City / S	itate)				
FAMILY						
This section is re	<i>quired</i> for appli	cants under the a	ge of 21 and	optional for applic	ants 21 and older.	
My parents are	Married	Separated	Divorced	Other		
Father	Stepfather	Guardian		Mother	Stepmother	Guardian
Name				Name		
Work Phone ()			Work Phone (
Home Phone ()			Home Phone (
E-Mail Address				E-Mail Address		
Level of Education	/College Attend	ed		Level of Education	n/College Attended	
My sibling(s) are	(indicate year i	n school or college	e(s) attended):		

OPTIONAL

Information requested here is <i>volur</i> rights laws.	ntary and will be used in a nondi	scriminating mar	ner, cons	istent with ap	plicable civil	
☐ American Indian/Native Americ	an or Alaskan Native					
□ Asian or Pacific Islander (including Indian sub continent)						
☐ Black/African American (non-Hi	spanic)					
☐ Hispanic (or Spanish surname)						
☐ White, Anglo, Caucasian (non-	Hispanic)					
□ Other (Specify)	· · · · · · · · · · · · · · · · · · ·					
						
Social Security Number (If you plan encouraged to provide your Social Security	to apply for financial aid you are strong y number.)	Religio _{lly}	us Affiliat	tion		
☐ I have attached a recent photo	to this page <i>(optional)</i>					
ACADEMIC BACKGROU	ND					
Beginning with the most recent, lis	st every high school, college or	university you I	nave atte	nded.		
School Name	City / State	Froi Mont	n h/Year	To Month/Year	Graduation Month/Year	
					/	
		/			/	
		/			/	
		/			/	
For Applicants Currently Atte	ending High School or Rec	ently Gradua	ted fron	n High Sch	ool:	
High School Name	Mailing	Address			· · · · · · · · · · · · · · · · · · ·	
Counselor Name	Counselor Telephone					
For Applicants with College	or University Hours:					
Are you currently enrolled in a coll	ege or university?	Yes	No			
Where? What is your cumulative GPA?						
How many college credit hours wil	I you have completed at the tim	ne of application	?			
Will you earn a degree prior to the	e intended time of enrollment?_	If so,	what de	gree?		
What college courses do you have	e in progress?					
Are you eligible to return to all forr	ner institutions you have attend	ed?				

	AND FINALLY				
1	How did you first learn about TCU Ranch Management Program?				
,	Why did you choose to apply to the Ranch Management Program?				
	Relatives and friends who are Ranch Management Program alumni (indicate relationship):				
	Recommendation Letters Three letters of recommendation are <i>required</i> for admission to the Ranch Management Program. You should obtain a minimum of one recommendation letter from each of the following categories: academic, professional, and personal. Applications without letters of recommendation will not be considered. The recommendation letters should be sent to the attention of the Director of Ranch Management and mailed to: TCU Box 297420, Fort Worth, TX 76129 or emailed to: ranching@tcu.edu.				
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(Please attach an explanation if answering "yes" to either or both questions. Answering "yes" to either or both questions does not automatically disqualify you for admission, but will initiate a review by appropriate University officials.)

I certify that the information in this application is accurate, complete, and my own work. I acknowledge that any ommission or inaccurate information could jeopardize my standing with Texas Christian University.

SIGNATURE DATE

Your TCU Ranch Management application is complete when all of the following items are received by the Ranch Management Department:

Please mail completed application and application fee to:	TCU Ranch Management Program TCU Box 297420 Fort Worth, TX 76129
□ Recent photo of yourself (optional)	
$\hfill\Box$ Official transcripts from the high school, colleges, and ι	universities you have attended
□ Autobiography page (in your own handwriting)	
$\hfill\Box$ \$50 nonrefundable application fee, checks payable to "	TCU"
☐ Three recommendation letters	
☐ Application for admission	

If you have any questions about your application, please contact our office at 817-257-7145.

