

Supplemental Application

I. Personal Information				
Entering Year 2019	Last Name	First Name	Middle Name	
Program OT PA PT SLP	CAS ID		Date of Birth (MM-DD-YYYY)	
Current Street Address		Current City, State, and Zip		
Country of Birth		Previous Name(s)		
II. Residency Information				
Are you a U.S. citizen? Yes No	If no, country of citizenship?	Type of Visa	Visa Expiration	Resident Alien ID
Are you a Texas Resident? Yes No	If yes, what is your county of residence?		How long have you lived in this county? Less than 12 months More than 12 months	
If less than 12 months, prior residence Street Address		Prior residence City, State, and Zip		
Within the last 12 months, have you been a student at an institution of higher education? Yes No		Full Name of Institution		
Have you previously applied for admission to UTHSCSA? Yes No		If yes, list program and date of application. Program Date		
III. Planned or In Progress Coursework <i>If needed, attach a separate document to include all coursework.</i>				
Your Course Number	Your Course Name	Your Course Year	Your Semester Enrolled	Your Course Institution

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IV. GRE (Graduate Readiness Exam)			
I have NOT taken the GRE, but plan to take the exam on:			
Attempt	1 st	2 nd	3 rd
Date GRE Taken			
Overall GRE Score			
Verbal GRE Score			
Quantitative GRE Score			
Analytic Writing GRE Score			
V. Payment of the Supplemental Application Fee			
Pay the Supplemental Application Fee of \$60 online at https://commerce.cashnet.com/uthscsasf .			
VI. Submission of the Supplemental Application			
Attach this completed form as a PDF directly onto your CAS application, under the Program Materials Documents Other Section.			
VII. Signature			
I hereby certify that any statements submitted in conjunction with this application are true.			
Signature		Date Signed	