

**AUBURN UNIVERSITY'S  
APPLICATION FOR THE  
ACADEMIC COMMON MARKET**

Application  
Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

ID #: \_\_\_\_\_ SSN: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Current Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Permanent Phone: \_\_\_\_\_

Major: \_\_\_\_\_

Term to Initiate ACM Status: \_\_\_\_\_

State of Residency: \_\_\_\_\_

\*\*Please attach an unofficial transcript.

COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

**For office use only:**

approved

deferred/postponed

denied

Signature: \_\_\_\_\_

Date: \_\_\_\_\_