



University of Idaho

Academic Year 2025-2026 New Student Intake Form

<i>* denotes required information</i>					
Last Name*		First Name*		M.I.	
Gender Identity & Preferred Pronouns (Optional)		Date of Birth*		Today's Date*	
Current Major/Area of Study*			Student ID #*		
Personal E-mail Address*			Student E-mail Address* @vandals.uidaho.edu		
Home Address*					
City*		State*		Zip*	
University of Idaho Housing:*					
<input type="checkbox"/> On-Campus Residence Hall <input type="checkbox"/> On-Campus Apartment <input type="checkbox"/> Fraternity or Sorority <input type="checkbox"/> Off-Campus					
- Residence Hall: (Building & Room Number)					
- Fraternity/Sorority Chapter House:					
- If Off Campus, Local Address:					
Permanent Phone			Cell Phone*		
UI Current Class Standing*: Freshman Sophomore Junior Senior					
Are you a current or former TRIO/Student Support Services participant? * <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Intend To					
Are you currently working with the Center for Disability Access and Resources (CDAR)? * <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Intend To					
Have either of your parents earned a bachelor's degree or higher? * <input type="checkbox"/> Yes <input type="checkbox"/> No					
The best way for us to send appointment reminders, program information, & involvement opportunities? <input type="checkbox"/> Text <input type="checkbox"/> Email					
May we acknowledge your birthday at monthly cohort meetings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<i>Ethnic/Racial Identity: Please Check All That Apply (optional)</i>					
<input type="checkbox"/>	African American/Black	<input type="checkbox"/>	Hispanic/Latinx		
<input type="checkbox"/>	Asian American/ Pacific Islander	<input type="checkbox"/>	White:		
<input type="checkbox"/>	Native American	<input type="checkbox"/>	Other:		

