



COLLEGE CREDIT PLUS Application Form

If you have any questions, contact the Office of Admissions at 419-885-5291 or 800-878-3210 ext. 5291, luadmits@lourdes.edu or visit our web site at www.lourdes.edu/admissions.

1. Name _____ 2. SSN # _____
Last First Middle (Previous names - Optional)
3. Address _____
Street City State Zip County
4. Home Phone (include area code) (_____) _____ Cell Phone (_____) _____
Email _____ Can we text message you? Yes No
5. Male Female
6. Date of Birth _____
Month Date Year
7. Are you a legal resident of Ohio (12 months continuous residence?) Yes No
8. U.S. citizen: Yes No If no, what country _____ Visa type _____
9. Emergency contact name _____ Phone (include area code) (_____) _____
10. I anticipate starting classes:
 Fall (Aug.-Dec.) Spring (Jan.-May) Summer (May-July) Year _____
Attendance: Full Time Part Time

HIGH SCHOOL INFORMATION

Check one: Public High School Private High School Home School

11. Name of High School _____
City _____ State _____
Expected Date of Graduation _____

Home school and/or private high school students **must** submit the funding application letter to enroll in class.

COLLEGE INFORMATION

Colleges Attended - If you have attended any prior colleges or universities, please indicate those below, and have official transcripts sent to the Office of Admissions, whether or not you received any credit. Failure to do so may delay or invalidate admission, or result in loss of credit.

12. List all colleges and universities attended (most recent college first)

College/University City/State Dates Attended (Month/Year) How many hours?

EDUCATIONAL PLANS

13. List all colleges to which you plan to, or have already submitted an application (optional)

14. I am interested in participating in the following College activities:

- | | |
|---|--|
| <input type="radio"/> Student Government | <input type="radio"/> Volunteer/Community Service Programs |
| <input type="radio"/> Recreational/Athletic Activities/Sports Clubs | <input type="radio"/> Campus Ministry |
| <input type="radio"/> Professional Organizations | <input type="radio"/> Chorus |
| (connected with your academic interest) | <input type="radio"/> Concert Band |
| <input type="radio"/> Orchestra | <input type="radio"/> Other (specify) _____ |

Information contained in this box is not used for admission purposes but is used for statistical reporting to state and federal agencies.

15. How would you describe yourself? (Check all that apply)

- A. Hispanic/Latino Non Hispanic
B. American Indian Native Hawaiian Pacific Islander
 Alaskan Native-Tribal Affiliation Asian American, Asian None of the above: please specify _____
 African-American/Black Caucasian/White _____

16. What is your religious affiliation preference? (Please check one)

- A.M.E. Church of Christ Jewish Roman Catholic Other (specify): _____
 Baptist Episcopal Lutheran United Methodist _____
 Buddhist Hindu Presbyterian No Affiliation _____

17. Employer/Company Name _____ Location _____ Hours per week _____

18. Please indicate if you have ever been suspended or dismissed from a high school, college or university for the following reasons:

- Academic: Yes No Disciplinary: Yes No (If yes, please attach a brief explanation of the offense.)

19. Have you ever been convicted of a criminal offense other than a minor traffic violation or are there such criminal charges pending against you? (If yes, please attach a brief explanation of the offense.)

- Yes No

PARENT INFORMATION

20. Please indicate the highest level of education of your parent, either mother or father.

- High School Graduate or less Post High School/Technical Degree (not college) Graduate, Professional Degree
 Some College College Graduate

21. Is your mother, father or legal guardian a graduate of Lourdes University? Yes No

22. Parent Name _____ Phone (include area code) (_____) _____

Address _____
Street City State Zip County

Employer's Name/Company Name _____ Location _____

23. Parent Name _____ Phone (include area code) (_____) _____

Address _____
Street City State Zip County

Employer's Name/Company Name _____ Location _____

By signing this application you say:

1. All information that I have provided is correct and complete.
2. I understand that any misrepresentation of facts on this application could be cause for denial of admission or dismissal from Lourdes University if discovered after I matriculate.
3. If I am accepted by Lourdes University, I understand that I will be expected to abide by all Lourdes University regulations and rules.
4. If I am accepted as a home school or private high school student, I must submit the funding application by April 1.
5. Lourdes University representatives have my permission to release my name and financial information for scholarship nomination and recognition.
6. I authorize any schools or colleges I have previously attended to release personal and academic information to Lourdes University.

Lourdes University, in accordance with Title VI of the Civil Rights Act of 1964, operates in a non-discriminatory manner with regard to race, color, age, or national origin. Furthermore, as required by Title IX of the 1972 Education Amendments, Lourdes University does not discriminate on the basis of race, color, creed, sex, age, religion, national origin, ancestry, citizenship, sex, disability, military or veteran status, age, or other legally protected category in its programs, activities, and employment. Lourdes University also provides equal opportunity to qualified disabled persons in accordance with the requirements of the Americans with Disabilities Act. A Catholic institution in the Franciscan Tradition.

Applicant's Signature _____ Date _____