

COLLEGE OF LIFELONG LEARNING APPLICATION FOR ADMISSION



Name _____ Former Name _____
 First Middle Last

Permanent Address _____
 Number and Street Apt Number

_____ City _____ State _____ Zip Code _____

Telephone _____
 Day _____ Evening _____ Cell _____

E-mail Address _____ Male _____ Female _____

Birth Date ___/___/___ Social Security Number _____ (used to match financial aid application)

Have you previously applied to Immaculata? Yes _____ No _____

Please check one:

U.S. Citizen Permanent Resident/Green Card International Student – Visa Status: _____

Country of citizenship: _____ First Language (if other than English) _____

ACADEMIC INFORMATION

I wish to be admitted to the program checked below, beginning with

Semester: Fall _____ Spring _____ Summer _____ **Year:** _____

Accelerated Degree Completion Program (ACCEL®)

On Campus _____ Off-Site at _____

Major _____ Degree (please circle) AS BA BSN

Online Bachelor of Arts Degree Completion Program

Financial Management Health Care Management

Human Performance Management Organization Dynamics

Continuing Education Program (certificates, associate's and bachelor's degrees offered on the main campus during the day, evening and on weekends; semester based instruction)

Major _____ Degree (please circle) AS/AA BA/BS BMUS

Certificate in _____

Teacher Certification Post-Baccalaureate Program

School Nurse Certification

Enrichment Courses (credit courses that may or may not lead to a degree)

CURRENT EMPLOYMENT INFORMATION

Employer _____ Job Title _____
Address _____ City/State/Zip Code _____

My employer offers tuition reimbursement

EDUCATIONAL BACKGROUND

Name of High School _____ City/State _____ Dates _____ Degree _____
Name of College/University _____ City/State _____ Dates _____ Degree _____
Name of College/University _____ City/State _____ Dates _____ Degree _____

Indicate your career goals:

Indicate your educational goals:

To meet newly revised federal requirements for the collection and reporting of race/ethnicity, please answer the following questions:

- 1. Are you
 - Hispanic or Latino
 - Not Hispanic or Latino
- 2. Select one or more of the following groups in which you consider yourself to be a member:
 - American Indian or Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian or other Pacific Islander
 - White

How did you learn about Immaculata's programs?

- Brochure
- Poster
- Alumni (Name) _____
- Current Student (Name) _____
- Newspaper
- At Work
- Radio/TV
- Direct Mail
- Web/Internet

Signature of Applicant _____ **Date** _____

Students applying to an ACCEL® or Online Program must submit a non-refundable \$50 application fee to be considered for admission	
Mail ACCEL® to	Mail Continuing Education and Online Programs to
Immaculata University College of LifeLong Learning – P.O. Box 656 Immaculata, PA 19345-0656	Immaculata University College of LifeLong Learning – P.O. Box 300 Immaculata, PA 19345-0300

Immaculata University is committed to the principle of equal educational opportunity without discrimination because of a person's race, gender, ethnicity, religion, age, national origin, color, disability, marital status, veteran status or other classifications protected by law or University policy.