

Mail To:

Office of Admission John Carroll University 20700 North Park Blvd. University Heights, OH 44118-4581

Application for Part-time Admission or Readmission

Please print out this application, complete it, and then mail the completed application to the above address.
I am applying for: [] Part-time Admission [] Readmission
If you are applying for readmission:
What is the date of your last attendance at John Carroll?
Academic standing at John Carroll: [] Good Standing [] Probation [] Dismissal
 If you were dismissed or on probation, you must submit a written petition with this application. If you have attended another college since you last attended John Carroll University, you must submit an official transcript to the Office of Admission.
PLEASE PRINT OR TYPE YOUR RESPONSES TO THE FOLLOWING.
Personal Information
Student Name [] Male [] Female Last First M.I.
Home Address
CityStateZip CodeCounty
Home Phone ()Cell Phone ()
E-mail Address@
Date of Birth//
Are you a: [] U.S. Citizen [] Resident Alien - # [] Other
Do you intend to apply for financial aid? [] Yes [] No
Optional Personal Information
Religious Affiliation
Ethnic Origin: [] Native American [] African American [] White [] Asian or Pacific Islander [] Hispanic [] Other
Academic Information
Year of Desired Entrance [] Fall [] Spring [] Summer
Indicate the program/major you plan to pursue:

SCHOOL	CITY/STATE	DATES ATTENDED	
ave you ever been found responsible for rade (or the international equivalent) for sulted in your probation, suspension, re	rward, whether related to a	cademic misconduct or behavio	ral misconduct, that
yes, please explain			
ave you ever been convicted of a misder	neanor, felony, or other cri	me? [] Yes [] No	
yes, please explain			
f you have ever experienced academic di eady to resume course work. Use space pro			plain why you are now
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