



Mail to: Office of Admission
John Carroll University
1 John Carroll Boulevard
University Heights, Ohio 44118
Fax: (216) 397-4981

Application for Readmission
or
Part-time Admission

Please print out this application, complete it, and then mail or fax the completed application to the above address.

I am applying for: [] Readmission: [] full-time [] part-time
[] Part-time Admission: [] degree seeking [] non-degree seeking

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

- 1. If you were dismissed or on probation, you must submit a written petition with this application.
2. If you have attended another college since you last attended John Carroll University, you must submit an official transcript to the Office of Admission and a completed Transfer Reference Form (on website).

PLEASE PRINT OR TYPE YOUR RESPONSES TO THE FOLLOWING.

Personal Information

Student Name _____ [] Male [] Female

Home Address _____

City _____ State _____ Zip Code _____ County _____

Home Phone (____) _____ - _____ Cell Phone (____) _____ - _____

Email Address _____

Date of Birth ____/____/____

Are you a: [] U.S. Citizen [] Resident Alien- # _____ [] Other _____

Do you intend to apply for financial aid? [] Yes [] No

Do you intend to live on campus (full-time students only)? [] 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: _____

List the high school from which you graduated and all colleges at which you have taken courses for credit. Please have an official transcript sent from each college.

SCHOOL	CITY/STATE	DATES ATTENDED	DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been found responsible for a disciplinary violation at an educational institution you have attended from 9th grade (or international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal, or expulsion from the institution? [] Yes [] No

If yes, please explain

Have you ever been convicted of a misdemeanor, felony, or other crime? [] Yes [] No

If yes, please explain

If you have ever experienced academic difficulties, please describe the reason for your difficulty and explain why you are now ready to resume course work. Use space provided below; additional paper may be used.

Employment Data

Present Employer _____ Position _____

Work Phone (____)____-____ May we contact you at work? [] Yes [] No

Does your employer provide tuition reimbursement? [] Yes [] No

Signature:

My signature below indicates that all information contained in this application is complete and correct. I understand that any deliberate attempt on my part to conceal or modify any information is adequate cause for denial of this application for admission or dismissal from the University.

Signature _____ Date _____

FOR OFFICE USE ONLY

Conditions _____ _____ _____
Approved _____
Date _____