

OAKWOOD UNIVERSITY

ADMISSIONS APPLICATION

Legal Name _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"> Last Name First Name Middle/Maiden </div>	OFFICE USE ONLY: APP FEE _____
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PLEASE PRINT LEGIBLY

***Permanent Contact Information**

Street No. or P.O. Box _____ City _____ State _____ Zip Code _____

(____)____ - _____ (____) _____ - _____ - _____
 Area Code & Telephone Number **Country Code Country Social Security Number

Temporary address, if different from permanent, effective from _____ / _____ / _____ to _____ / _____ / _____
Month Day Year Month Day Year

Street No. or P.O. Box _____ City/State _____ Zip Code _____ Phone _____ Country _____

Birth date _____ / _____ / _____ *Birth place _____ Native Language _____
Month Day Year City State

Please Circle: Sex: **Male** or **Female** Marital Status: **Single** **Married** **Divorced** **Separated** **Widowed**

*Country of Citizenship: U.S. Citizen _____ Permanent Resident _____
State State of Residence

Residence Alien Card # _____ International _____
Country

Language(s) Spoken _____ Did You Take TOEFL Exam? **Yes** or **No** Score _____

Have You Attended Oakwood University Before? Yes or No **Check here, if you are a transfer student.**

Religious Preference: S.D.A. _____ or Other _____
Conference/Division Denomination

Major _____ **Semester to Enroll:** Fall 20____ (August-December)
Spring 20____ (January-May)

Graduate of _____ **Date:** _____ / _____ / _____
Academy/High School/G.E.D. City State/Country Month Day Year

Who/What Influenced Your Request for This Application the Most? _____

How Serious Are You About Attending Oakwood University? (Circle 1-5): 1 2 3 4 5
Not serious Serious

How Long Do You Plan to Attend Oakwood University? (Circle 1-5) 1 2 3 4 5 (Years)

* Do not abbreviate international countries. ** Country Codes are required for International phone numbers.

(Continue on reverse side)

Please list all colleges attended:

(a) School Address/P.O. Box City State Zip Code Country

Dates: From Month/Year to Month/Year Degree(s) or Diploma received

(b) School Address/P.O. Box City State Zip Code Country

Dates: From Month/Year to Month/Year Degree(s) or Diploma received

(c) School Address/P.O. Box City State Zip Code Country

Dates: From Month/Year to Month/Year Degree(s) or Diploma received

Please indicate where you plan to live while attending Oakwood : (Please Circle) Note: Students under 22 are required to live on campus. Family-student apartments are available for married students or single parents only.

Residence Hall Family-student Apartments Community

Are you a veteran of the U.S. Armed Forces: Yes or No Veteran's Number

If yes, are you a Veteran eligible for educational benefits? Yes or No

The ethnic/racial information requested to fulfill reported obligations to the federal government. (OPTIONAL)

- American Indian or Alaskan Native
African-American/Non-Hispanic Origin
Asian or Pacific Islander
Hispanic
Caucasian/Non-Hispanic Origin
International/Non-Resident Alien
Other

Names of both parents, legal guardian, or next of kin:

Father's Last Name, First Name Address City State/Country Zip Code Phone Number

Mother's Last Name, First Name Address City State/Country Zip Code Phone Number

PLEASE READ AND SIGN:

In asking for admission to Oakwood University, I voluntarily agree, if admitted as a student, to uphold the ideals, standards, and regulations set forth by the University and to respect the principles and traditions it upholds as a Seventh-day Adventist institution of higher learning. I also accept the responsibility for payment of all expenses incurred while at Oakwood University. I further understand that my registration depends upon submission of final official transcripts from previously attended secondary schools and current official copies from post secondary schools.

Signature Date