

Application for Admission



The Center for Extended Learning
Rochester College-Est. 1959
800 W. Avon Rd
Rochester Hills, MI 48307
www.rc.edu/cel

Personal Data

Last Name _____ First Name _____ Middle Name _____

Maiden Name _____ Preferred Name _____

Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-Mail Address (if applicable) _____

Social Security Number _____ Birth Date (Mo/Day/Yr) _____

Sex: Male Female What is your religious preference _____

Please list any relatives who have previously attended Rochester College _____

Have you previously attended Rochester College? Yes No

If yes, please list year and former name _____

Have you been convicted of a criminal offense other than minor traffic violations? Yes (attach **thorough** explanation) No

Have you, for any reason, been suspended or dismissed from an academic institution? Yes (attach **thorough** explanation) No

Are you a U.S. citizen? Yes No Are you a U.S. resident? Yes No

If you selected no, what is your citizenship/status (i.e. F1 or MI Student Visa, etc.) ? _____

Are you a veteran? Yes No Do you expect to receive VA benefits? Yes No

Will you be applying for financial aid? Yes No **Please note: Rochester College's school code is 002288

Racial Background. This information must be reported to the U.S. Office for Civil Rights by institutions of higher education under Title VI of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972. It is not used in application decisions.

American Indian or Alaskan Native African American/Black White (Non-Hispanic) Hispanic

Asian or Pacific Islander Other (please specify) _____

Equal Access and Opportunity: Rochester College is committed to the policy of providing equal opportunity for all persons and does not discriminate in admissions, programs, or any other educational functions and services on the basis of race, color, creed, national origin, gender, age, veteran status, religion, or disability to those who meet its admission criteria and are willing to uphold its values as stated in the student handbook. (See college catalog for full statement)

Employer Data

Employer Name _____ Title _____ Start Date _____

Employer Address (address, City, State, Zip) _____

Have you been employed full-time for three or more years? Yes No

(If you are under the age of 23, please list employers and dates on a separate piece of paper)

Are you eligible for tuition assistance from your employer? Yes No

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Academic Data

CAMPUS (please select one campus)

- CEL Main Campus (Rochester Hills)
- Macomb University Center (Clinton Twp)
- Mott University Center (Flint)
- Specs Howard (Southfield)

PROGRAM (please select one program)

- BBA Management
- BS Counseling Psychology
- BS Early Childhood Studies
- BS Organizational Leadership and Communication
- BS Mass Communication
(Broadcasting/Public Relations/Media and Communication Arts)
- BS Biblical Studies
- Associate of Arts
- Non Degree Seeking/Audit

Proposed Enrollment Date:

- Fall (Aug-Dec)
- Spring (Jan-April)
- Summer (April-Aug)

Will you be attending:

- Full Time (12 or more credits per semester)
- Part Time (6-9 credits per semester)
- Half Time or less (less than 6 credits per semester)

Of what year? 20 _____

Educational Data

It is necessary to list your last high school attended and list ALL schools, colleges, universities, and specialized institutions attended after high school. Attach an additional sheet if necessary. **Carefully read the signature statement at the bottom of the application.**

Name of last high school attended (include City/State) _____

Did you receive a diploma? Yes No Date awarded (month/yr) _____ G.E.D. Score _____
(if applicable)

School or College	Location (City/State)	Dates Attended	Degrees/Diplomas/Certifications
1. _____			
2. _____			
3. _____			
4. _____			

In the event of an emergency, please contact (name and number) _____

Applicant Certification

I understand that withholding information requested on this application or giving false information will make me ineligible for admission to Rochester College or subject to dismissal. I understand that Rochester College is a Christian institution and I agree to comply with the rules and regulations of the institution as outlined in the college catalog and the student handbook.

SIGNATURE REQUIRED _____ DATE _____

Rochester College is accredited by the Higher Learning Commission and a member of the North Central Association.

Do not write below this line. For internal use only

- Admission Granted
- Admission on Academic Alert
- Admission Denied

