

NOTRE DAME COLLEGE APPLICATION FOR UNDERGRADUATE ADMISSIONS

Please type or print all requested information in the spaces provided | A one-time, non-refundable \$30.00 fee must accompany your application | Do not send cash.

Mail your application to | Notre Dame College, Office of Admissions, 4545 College Road, Cleveland, OH 44121

Check List | Application High School Transcripts College Transcripts (if applicable) Application Fee

background information

Last Name _____ First Name _____ Middle Name _____

Marital Status Single Married | Former Name _____ Male Female

Social Security Number _____

Address _____

City _____ County _____ State _____ Zip Code _____

Home Telephone () _____ E-Mail Address _____

Date of Birth _____ Ethnic Origin (optional) _____

Are you a U.S. Citizen? Yes No | If no, country of citizenship _____

Alien Registration Number _____ or Visa Type _____

Have any of your relatives graduated from NDC? Yes No | Name _____

Are any of your relatives Sisters of Notre Dame Yes No | Name _____

colLEge PLans

I am interested in: Adult Semester Day | Weekend College | Both

Adult Day Student

Do you plan to take your coursework primarily during the semester? Yes No

If Yes, for which term and year are you applying?

Fall Semester 20_____ Spring Semester 20_____

Summer Session 20_____

Do you plan to enroll on a full-time basis? Yes No

What is your intended major? _____

Will you be seeking a degree? Yes No **OR**

Will you be seeking a certificate? Yes No

Weekend College Student

Do you plan to take your coursework primarily during Weekend College? Yes No

If Yes, for which term and year are you applying?

WECO Term I 20_____ WECO Term II 20_____

WECO Term III 20_____ WECO Term IV 20_____

What is your intended major? _____

Will you be seeking a degree? Yes No **OR**

Will you be seeking a certificate? Yes No

empLoyment

Employer _____

Your Title/Position _____

May we contact you at work? Yes No | Work Telephone () _____

high school experience

High School _____

High School City & State _____

Are you a high school graduate? Yes No | Year of graduation _____

OR

Have you earned a General Education Diploma (GED)? Yes No | Year _____

previous college experience (if applicable)

College/University _____ City and State _____

Dates Enrolled _____ Degree Received _____ # of Credits Earned _____

College/University _____ City and State _____

Dates Enrolled _____ Degree Received _____ # of Credits Earned _____

College/University _____ City and State _____

Dates Enrolled _____ Degree Received _____ # of Credits Earned _____

College/University _____ City and State _____

Dates Enrolled _____ Degree Received _____ # of Credits Earned _____

what most influenced your application

- NDC Admissions Representative NDC Student NDC Faculty NDC Alumni
- Relative/Friend NDC Viewbook Employer NDC Website
- Radio Newspaper Campus Visit Program of Study
- Other _____

Personal statement

I certify that the information that I have provided on this application is true and complete to the best of my knowledge. I understand that falsification of information on this application could jeopardize my acceptance to and enrollment at Notre Dame College. I authorize any school that I have previously attended to release personal and academic information to Notre Dame College.

Signature _____ Date _____

Notre Dame College does not discriminate on the basis of race, creed, color, sex, national origin, age or disability in the administration of its academic and admission policies, scholarship and financial aid assistance programs and other College-administered services.