APPLICATION FOR ADMISSION AND TUITION AGREEMENT:

Sullivan University
Kentucky's Career University

3101 Bardstown Road
Louisville, Kentucky 40205

Entry Date_____ _____

ASSOCIATE OF SCIENCE IN BUSINESS DEGREE:

Check Degree Major Desired

- ❑ Accounting
- ❑ Marketing & Sales Mgt.
- ❑ Administrative Office Mgt.
- ❑ Computer Programmer
- ❑ PC Support Specialist
- ❑ Early Childhood Education
- ❑ Individual Subj; No Major Declared
- ❑ Other _____
- ❑ Information Technology
- ❑ Business Management
- ❑ Paralegal Studies
- ❑ Legal Secretary
- ❑ Travel, Tourism & Event Mgt.
- ❑ Medical Office Management
- ❑ Post-Baccalaureate Cert. in Paralegal Studies

❑ Day ❑ Full Time
❑ Evening ❑ Part Time

First Year Specialization:
_____

First Quarter Subject Request:
Monday: _____
Tuesday: _____
Wednesday: _____
Thursday: _____
Friday: _____
Saturday: _____
Sunday: _____

A nonrefundable application fee must accompany this application for admission, if this is your first enrollment at Sullivan University. If you have attended Sullivan previously the fee is <u>not</u> required.

PERSONAL:

(please print or type)

• Student name _____
LAST FIRST MIDDLE

• Current address _____ Phone number (_____) _____
STREET NUMBER, STREET, OR RURAL ROUTE

City _____ State _____ County _____ Zip Code _____

Email address _____ Cell phone number _____

Age _____ Date of Birth _____-_____-_____ Social Security number _____-_____-_____

Are you a U.S. citizen? _____ yes _____ no If no, what is your immigration status? _____

• If you live with your parent(s) or guardian, give their name below:

Parent's name _____

• If you are currently working at least 25 hours a week, list employer information below:

Name of employer _____ Phone number_____

• Have you ever been convicted of a felony? _____ yes _____ no (Paralegal majors only)

EDUCATIONAL:

• Name of high school you are now attending or from which you have graduated:

High school name _____ Year of graduation _____

• **or...**If you have earned your GED, give the City and State where you were tested: _____ Year GED was received _____

• Have you previously attended Sullivan University? yes_____ no_____

If so, list the dates of attendance: from_____-_____to_____-_____

• List other colleges or career schools you have attended:

1-Name of College _____Dates attended_____Credits or degree earned_____

2-Name of College _____Dates attended_____Credits or degree earned_____

HOUSING:

• Are you planning to live in university housing? yes_____ no_____ Housing application completed? yes_____ no_____

SULLIVAN UNIVERSITY – TUITION AGREEMENT

In consideration of my acceptance as a student by Sullivan University, I understand and agree that my tuition charge is based upon the number of credit hours for which I am enrolled each academic quarter (11 weeks). The **first quarter's** charge is $_____ per credit hour multiplied by _____ credit hours which equals $_____ for this quarter. Charges for future quarters will be calculated in the same manner. The above credit hour rate will remain in effect as long as I am **continuously enrolled** at Sullivan University in the program designated above; however, should I withdraw and return, change programs or enter graduate school, the per credit hour tuition rate in effect at **that** time will be charged.

I agree that the university may use my name and picture in university literature, publications, or advertising. The university reserves the right to reject any application for admission and will return any application deposit made if the application is rejected.

Please refer to the catalog for Sullivan University's refund policy and the Department of Education's policy on the return of unearned Title IV funds.

Any balance remaining unpaid will be due and payable by the last day of attendance each quarter. In the event that anticipated financial arrangements do not meet the tuition cost, I realize that I am still responsible for such tuition and legal/attorney fees if legal action becomes necessary.

This agreement is not binding until the date of student entrance.

_____ _____ _____ _____
Student Signature Date Parent Signature Date

FOR OFFICIAL USE ONLY

A/O _____
Appl. fee pd. _____
Date _____
Receipt number _____
Source _____
Code # _____
T & T date _____
Test(s) used _____
Scores rec'd _____
FA ❑ _____
SI ❑ CP ❑ DA ❑ DP ❑ CA ❑ VA ❑
Other _____
RSOA 1 2 - 1 2 3 4 5 6
Uniform Size W _____ J _____
Blazer Size _____
Date officially accepted _____