



THE CATHOLIC UNIVERSITY OF AMERICA

SECOND DEGREE APPLICATION

SECOND DEGREE APPLICATION CHECKLIST

- Nonrefundable application fee of \$55 Completed and signed second-degree application Official copies of academic transcripts
- Statement of intent Letter of recommendation (two letters are required for the nursing program)

..... Please type or print the following and return with application fee to Office of Admissions

Fall 20 _____	Spring 20 _____	Summer 20 _____
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Legal Name _____
As it appears on legal documents First Name Full Middle Name Last Name

Nickname _____ **Maiden Name** _____ **Suffix** Jr. II III Other _____

Gender Male Female **Social Security Number** _____ - _____ - _____

Birth Date ____/____/____ **Email Address** _____
mm dd yyyy

Permanent Home Address _____

Home Phone Number (_____) _____ - _____ **Cell Phone Number** (_____) _____ - _____

If different from above, please give your mailing address to which all admissions information will be sent.

Mailing Address _____

Phone Number at Mailing Address (_____) _____ - _____

Citizenship U.S. Citizen Dual U.S. Citizen U.S. Permanent Resident Other Citizenship

Country(ies) of Citizenship _____

Country of Residence _____

Alien Registration Number _____

If you are not a U.S. citizen and live in the United States, how long have you been in the country? _____

OPTIONAL INFORMATION (Information provided is not used in a discriminatory manner.)

Place of birth _____

First language, if other than English _____

Language spoken at home _____

If you wish to be identified with a particular group, please check all that apply:

1) Are you Hispanic or Latino? Yes No

2) Check one or more of the following groups in which you consider yourself to be a member:

Native American or Alaskan Native Black or African American White

Native Hawaiian or Other Pacific Islander Asian

Religious Preference Buddhist Islamic Hindu Jewish

Catholic _____
If Roman or Orthodox Catholic, specify your (arch) diocese

Christian _____
Specify denomination

Other _____

SELECT THE ACADEMIC SCHOOL TO WHICH YOU ARE APPLYING

- | | |
|--|---|
| <input type="checkbox"/> School of Architecture and Planning | <input type="checkbox"/> Benjamin T. Rome School of Music |
| <input type="checkbox"/> School of Arts and Sciences | <input type="checkbox"/> School of Nursing |
| <input type="checkbox"/> School of Business and Economics | <input type="checkbox"/> School of Philosophy |
| <input type="checkbox"/> School of Engineering | <input type="checkbox"/> National Catholic School of Social Service |

What program/major are you applying for? _____

EDUCATIONAL DATA

List all colleges/universities which you have taken courses for credit. Please submit official transcripts.

Name of College/University	Address (City, State, Zip, Country)	Type of Degree	Dates Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY

List all the places of former employment including current employer.

Position	Employer	Dates of Employment		Responsibilities
		To:	From:	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- | | | |
|---|--------------------------------|-----------------------------|
| Have you ever been convicted of a crime (other than a minor traffic violation)?
<i>*Please explain on a separate sheet of paper and attach to your application.</i> | <input type="checkbox"/> Yes* | <input type="checkbox"/> No |
| Have you ever been sanctioned by a school resulting in probation and/or suspension?
<i>**Please explain on a separate sheet of paper and attach to your application.</i> | <input type="checkbox"/> Yes** | <input type="checkbox"/> No |

STATEMENT OF INTENT On a separate page, please write an essay describing the nature of your interest in obtaining a second bachelor's degree. Please provide any information about you which will assist us in evaluating your application.

I understand and agree that this application and any other information received by the Office of Admissions are property of The Catholic University of America and shall be considered confidential. An enrolled student's access to his/her education records is governed by CUA's Student Records Policy. Certain items are excluded from access, including parents' financial records and documents and letters of recommendation, to which the student has previously waived access.

I understand and agree that The Catholic University of America is a private institution and, as such, retains the right to terminate a student's matriculation at any time his or her academic performance is seriously deficient or his or her conduct becomes injurious to the maintenance of good order or disruptive to the academic atmosphere.

I affirm the information and statements contained in this application are, to the best of my knowledge, true, correct and complete. I agree to promptly notify The Catholic University of America of any changes to this application.

Further Information for Applicants: Online Student Handbook: studenthandbook.cua.edu

Required Title IV and IX Disclosures: counsel.cua.edu/StudLife/publications/consumerinfo.cfm

Information for Students with Disabilities: dss.cua.edu

Student's Signature _____ Date _____

Mail to: The Catholic University of America, Office of Admissions, 620 Michigan Ave., N.E., Washington, DC 20064

The Catholic University of America admits students of any race, color, national or ethnic origin, sex, age, or disability.