

Ratchford University Online

• (888) 825-2777 Tel
• (888) 825-2777 Fax
Homepage: <http://www.online-ru.org>
Email: admissions@online-ru.org

Application

Must include \$20 non-refundable application fee
(check or money order)
NO CASH

for Undergraduate Admission

Please type or print in ink

(Check One): Mr. Mrs. Miss Ms. Temporary Reference number: _____
From initial inquiry and follow-up letters

Applicant's Full Name: _____
First Middle Last (Surname) Maiden

Mailing Address: _____
Street name and number or Post Office Box number Apt#

City: _____ State: _____ Postal (Zip) Code: _____ Country: _____

Permanent Address: _____
A physical street address is required for shipping packages. Courier service will not deliver to a post office box Apt#

Permanent City: _____ State: _____ Postal (Zip) Code: _____ Country: _____

Home Phone: _____ Home Fax: _____

Work Phone: _____ Work Fax: _____

Cell/Mobile Phone: _____ Email Address: _____

Social Security Number: _____ Date of Birth: _____ Sex: M F
YY / MM / DD

Country of Citizenship: _____ County of Residence: _____

State of legal residence: _____ What is your native language: _____

Non-U.S. citizen only. Include photocopy of both sides of Permanent resident Card with this application.

I have an immigrant visa. Date issued: _____ A# _____ I currently have a _____ visa.

Have you ever taken an English language test? Yes No If yes, please indicate which test:

TOEFL (date: _____) TWE (date: _____) MELAB (date: _____)

Please indicate the semester and year you expect to begin Ratchford University Online?

Fall 20_____ Winter 20_____ Spring / Summer 20_____

Race (Check one box only.) Note: Even if you are multiracial, please answer this question by indicating either the race you identify with most or the race with which you are usually associated in the community.

- | | |
|--|--|
| A. <input type="checkbox"/> Hispanic | D. <input type="checkbox"/> White (non-Hispanic) |
| B. <input type="checkbox"/> Asian or Pacific Islander (API) | E. <input type="checkbox"/> Black (non-Hispanic) |
| C. <input type="checkbox"/> American Indian, Eskimo, or Aleut (AIEA) | |

Are you Multiracial? Yes No For purposes of this question, you are multiracial if you have parents from more than one of the broad race categories listed above, or if your parents regard themselves as being multiracial.

Please attach \$20 check or money order here. Application fee must accompany application.

Educational History

Name & Address of Schools Attended	Dates Attended From - To	Qualifications Earned	Grade Point Average

Test Scores (Check tests taken and indicate scores)

[] TOFEL: _____ [] SAT: _____ [] ACT: _____ [] GRE: _____ [] GMAT: _____

Work Experience

Employer's Name & Address	Position Title	Period Employed From - To

High School

To Be Completed By the High School (Current High School Students Only)
Please complete the section below. Include an official transcript when submitting application and application fee.

[] Student has taken the ACT or SAT exam. Composite Score: _____ Date of Exam: _____

[] Student has not yet taken the ACT or SAT exam. Date student will take the exam: _____

Student's cumulative GPA: _____

Student's rank _____ in a class of _____

High School official's signature _____ Title _____

High School _____ ACT / ETS High School Code _____

City _____ Phone (_____) _____ State _____ Zip _____

Tuition Payment Information

Cash Check Credit Card Money Order Electronic Transfer

Credit Card (Check One): Visa Master Card American Express

Credit Card Number: Expiration Date: Day Year

Credit Card charge authorization for: Application Fee

Authorized Signature: _____ Date: _____

Agreement of Terms

I hereby declare that I have read and understand the University Catalog and I agree to abide by the Universities rules and regulations. I certify that the information provided on this application is true and complete to the best of my knowledge. I understand that providing false information may result in immediate dismissal and forfeiture of financial payments and academic credits.

Signature of applicant: _____ Date: _____

Additional Information

List any additional achievements, capabilities, skills, professional experience or educational goals that will further illustrate your suitability for admission to the program for which you are applying.

Do not write in the space below

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