Application for Admission

Accelerated Degree Programs
Undergraduate Studies

Holy Family University

The Value of Family

holyfamily.edu

Holy Family University
9801 Frankford Avenue
Philadelphia, PA 19114
267-341-5030
Academic Interest

Program of Interest:
☐ Business Administration
☐ Nursing (RN-BSN)

Preferred Location:
☐ Woodhaven Site in Bensalem
☐ Newtown
☐ Other

Anticipated Start Date
☐ Spring 20____  ☐ Summer 20____  ☐ Fall 20____

Personal Information  Please Print or Type

Date Social Security Number Date of Birth

Name (Last, First, Maiden/Middle)

Home Address
City State Zip Code

Home Telephone Number Email

Cell Phone Number Employer Name Position

Work Address
City State Zip Code

Work Telephone Number Employer Email

Preferred Email for University Communications

Please list all high schools attended or GED information (most recent school first):

<table>
<thead>
<tr>
<th>NAME OF SCHOOL</th>
<th>CITY, STATE</th>
<th>DATES OF ATTENDANCE</th>
<th>DATE OF GRADUATION</th>
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Please list all colleges, schools of nursing, and universities attended, including Holy Family University (most recent school first):

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<thead>
<tr>
<th>NAME OF SCHOOL</th>
<th>CITY, STATE</th>
<th>DATES OF ATTENDANCE</th>
<th>DATE OF GRADUATION</th>
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Please list any relatives who attended Holy Family University:

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<tr>
<th>NAME</th>
<th>RELATIONSHIP</th>
<th>DATES OF ATTENDANCE</th>
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Admissions Information

Will your employer reimburse you for tuition?  □ Yes  □ No  If yes, what percentage or amount? __________

Do you intend to apply for financial aid through Holy Family University?  □ Yes  □ No

How did you learn about Holy Family University’s Accelerated Undergraduate Program?

□ Referral (please name) ____________________________  □ Newspaper (please name) ____________________________
□ Radio ____________________________________________  □ Direct Mail ____________________________
□ Online ____________________________________________  □ Other ____________________________________________

To satisfy Federal Government requirements, please provide the following information (used for federal statistics, not to consider your admissibility to Holy Family University).

U.S. Citizen □ Yes  □ No  If no, country of citizenship ____________________________  Visa Status ____________________________

Optional Applicant Information  For statistical purposes only

<table>
<thead>
<tr>
<th>Ethnic Identity</th>
<th>Religion</th>
<th>County</th>
<th>Sex</th>
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<tbody>
<tr>
<td>□ Hispanics of any race</td>
<td>□ Buddhist</td>
<td>□ Philadelphia</td>
<td>□ Male</td>
</tr>
<tr>
<td>□ Nonresident Alien</td>
<td>□ Christian/Non-Catholic</td>
<td>□ Bucks</td>
<td>□ Female</td>
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<tr>
<td>□ Race and Ethnicity Unknown</td>
<td>□ Catholic</td>
<td>□ Delaware</td>
<td></td>
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<tr>
<td>For Non-Hispanics Only:</td>
<td>□ Hindu</td>
<td>□ Montgomery</td>
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<td>□ American Indian/Alaska Native</td>
<td>□ Jewish</td>
<td>□ Camden</td>
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<td>□ Asian</td>
<td>□ Muslim</td>
<td>□ Burlington</td>
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<td>□ Black or African American</td>
<td>□ Nonaffiliated</td>
<td>□ Mercer</td>
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<tr>
<td>□ Hawaiian/Pacific Islander</td>
<td>□ Not Recorded</td>
<td>□ Other</td>
<td></td>
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<tr>
<td>□ Two or more races</td>
<td>□ Other</td>
<td></td>
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<tr>
<td>□ White</td>
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Please Read and Sign

I understand that I am responsible for the submission and receipt of official transcripts of my records, and that the University will accept, for its permanent file, only those transcripts issued directly by the registrar of each institution I have attended.

Formal admission to Holy Family University as a degree candidate is granted only after all admission materials have been received and all minimum standards are met.

I certify that the statements submitted in this request for admission and evaluation are correct to the best of my knowledge and belief. I further authorize Holy Family University to make appropriate inquiries when necessary to certify the accuracy of my records.

Signature ____________________________  Date __________

Holy Family University is accredited by the Middle States Association of Schools and Colleges and does not discriminate on the basis of race, religion, ethnic, or national origin in the recruitment and admission of students or in the operations of any of its programs or activities.

Application Information

The following items must be submitted:

□ Application form
□ Non-refundable application fee of $25. Checks made payable to “Holy Family University”
□ Two letters of recommendation
□ Writing sample/original essay
□ Official transcripts for any previous college work or proof of high school diploma or GED certificate

International applicants and applicants whose first language is other than English must submit scores of the Test of English as a Foreign Language (TOEFL).

Applicants whose bachelor’s degree was obtained outside the United States, must submit all academic credentials to World Education Services (http://www.wes.org/) for a document-by-document review, which includes a course-by-course evaluation.
Writing Sample

In support of your application, on a separate sheet of paper, please write an original 1-2 page essay to address the following:

1. A description of your future professional goals
2. Why you believe this program will help you achieve the goals you have explained
3. Why you are applying to Holy Family University

Please Read and Sign

Effective writing skills are essential for success in an accelerated program at Holy Family University. Those students needing extra help in this area will be referred to a writing skills workshop or an appropriate outside source.

Holy Family University provides accommodations in accordance with the Americans with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act of 1973 to otherwise qualified students with documented disabilities. If you believe you qualify for such accommodations, please contact the Disabilities Office (267-341-3231) for policies and procedures regarding disability accommodations at Holy Family University.

Before any action can be taken on applications, this office must receive:

1. An application fee of twenty-five dollars ($25), in the form of a check made payable to “Holy Family University” or money order.
2. A transcript from every college, school of nursing, or university attended. If no previous college work, proof of high school diploma or GED certificate.
3. RN’s must submit a copy of current licensure/registry.
4. Copy of visa, if applicable.

APPLICANT’S SIGNATURE – I certify that the answers to the above are truthful and complete to the best of my knowledge and belief. Any omission, misrepresentation, or misstatement of a material fact on the application may be the basis for denial of admission, or if admitted, dismissal from the University.

Signature__________________________________________ Date ________________________________

Holy Family University does not discriminate on the basis of race, color, gender, age, religion, national or ethnic origin, sexual orientation, marital status, or disability. This policy extends to all educational, employment, and service programs at the University and complies with applicable federal laws. For information regarding compliance matters, the University’s ADA/Section 504 and Title IX Compliance Officer may be reached at the Human Resources Department, Holy Family Hall Room 209, 267-341-3479.