Undergrad App (2).pdf

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APPLICATION FOR UNDERGRADUATE ADMISSION

Online Nursing and Health Professions Programs Drexel eLearning

Before filling out this application form, please read the accompanying instructions.

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Please return this application form, accompanied by all required documents.

Application materials sent by United States Postal Service (USPS) send to: Application materials sent by an express carrier (FedEx, UPS, DHL, etc.,) send

to:

Drexel eLearning Drexel eLearning

P.O.

Box 34729 Attn: Applicant Services

Philadelphia, PA 19101

3001 Market St., Suite 18

Philadelphia, PA 19104

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It is your responsibility to ensure that all required credentials are received by Drexel eLearning before the deadline for the term for which you are applying.

Applications completed after the deadline may not be considered for the requested term.

•

The questions pertaining to gender and ethnic origin are optional and will be used for statistical purposes only.

161

(If you do not reside in the US and/or do not have a SSN, leave this field blank - otherwise this field is required.)

Social Security Number

Applicant’s Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last (Family

)

First (Given) Middle Suffix

Other name(s) under which transcripts may be issued \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

243

Male

247

Female Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender:

: Male

: Female

(mm/dd/yyyy)

Permanent Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Line 1

City

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Line 2

State/Province

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Line

3

Zip/Postal Code

Country

Primary Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

333

: Yes

Yes

339

: No

NoAre you a citizen of the United States?

If no, are you a permanent resident in the United States?

: Yes

Yes

: No

No

Visa Type: If you are not a permanent resident in the United States, indicate the type of visa you are requesting (e.g. B-2, F-1, J-1, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Note: If you entered a visa type above please submit a copy of the visa document.

Country of Citizenship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is English your first language?\*

450

: Yes

Yes

456

: No

No

\*Anyone who has been born outside of the fifty states of the US is required to take the Test of English as a Foreign Language (TOEFL) and have an official

score report

sent directly from Educational Testing Service (ETS) to Drexel University before their file is evaluated. TOEFL scores must be less than two years old to

be considered.

TOEFL Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOEFL Score \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(mm/yyyy)

Have you ever been the subject of a disciplinary action or investigation including, but not limited to: suspension, dismissal, expulsion, or denial of readmission

at any high school, post-high

school educational institution, college or university? Or, do you have any of these disciplinary or judicial actions pending or unresolved against you at

any high school, post-high school

educational institution, college or university? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted\* of a crime (including, without limitation, any crime involving violence, alcohol, or drugs), felony, or misdemeanor or do

you currently have any criminal charges

pending or unresolved against you in any court? \*Note: Conviction includes judgment, found guilty by a judge or jury, pleaded guilty or nolo contendere,

received probation without verdict,

disposition in lieu of trial, or ARD. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you answered yes to either question, you must submit an explanation on a separate sheet of paper, describing the disciplinary action or criminal charges

filed against you.

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Online Nursing and Health Professions Programs

Has any disciplinary action or any other type of restriction, limitation, rider, action or covenant ever been taken against your RN license? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, please describe (in the space below)

How did you hear about Drexel University Online? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a current Drexel online student referred you, please enter his/her full legal name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiliation Acknowledgement:

811

Yes

815

No --- I'm not affiliated Affiliation Code\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

: Yes

: No

\*Drexel University collaborates with a number of different corporations, professional associations, and health systems to offer employees and members the

chance to earn their degree online at

special discounted tuition rates.

RACE & ETHNICITY (The questions pertaining to ethnic origin and race are optional and will be used for statistical purposes only.)

Step 1: Please select one or more of the following ethnic groups:

899

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish-culture or origin, regardless of rac

e

: 2

: 1

Not Hispanic or Latin

o

Step 2: Please select one or more of the following races:

950

American Indian or Alaska Native

958

Asian (If applicable, please make further selections below)

970

Hispanic (If applicable, please make further selections below)

: 4

: 3

: 6

Black or African American

Chinese

Cuban America

n

: 2

: 31

: 61

Native Hawaiian or Other Pacific Islande

r

Filipino

Mexican America

n

: 5

Whit

e

Indian

Puerto Rican Amer - Commwlth

: 32

: 64

: 1

: 33

: 63

Japanese

Puerto Rican Amer - Mainland

: 34

: 62

Korean

: 35

Pakistani

: 36

Vietnamese

: 37

PROGRAM INFORMATION

Online degree program you wish to apply for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am applying for classes that begin in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How many college credits have you earned to date? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(mm/yyyy)

1110

Yes

1114

No

Have you previously applied to Drexel University?\*

: Yes

: No

\*If you applied within the past year, please contact Drexel eLearning to determine whether you must complete a new application.

If “yes,” program applied to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date applied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(mm/yyyy)

Level

1172

Undergraduate

1176

Graduate Were you accepted?

: Yes

: Undergraduate

: Graduate

Yes

1192

: No

No

EMPLOYMENT INFORMATION

If you are currently employed by a healthcare system, please indicate name of system: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chronologically list all work experience. Include full-time (F), part-time (P), summer work, or other experience.

table with 4 columns and 7 rows

Position and/or type of work performed

Dates

Full/Part Time

First Work Experience

Second Work Experience

Third Work Experience

Fourth Work Experience

Fifth Work Experience

Sixth Work Experience

table end

List extracurricular activities, volunteer work, and/ or hobbies you participated in as a student or otherwise: include offices held, honors/ distinctions

received.

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APPLICATION FOR UNDERGRADUATE ADMISSIO

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Drexel eLearning

Online Nursing and Health Professions Programs

EDUCATIONAL INFORMATION

List below, in chronological order, the name of every preparatory school, college, university, or other post-high school program in which you have been

enrolled. All

such institutions must be reported. Do not include high schools. Please request the schools attended to furnish official transcripts to the following address.

Transcript

request forms can be found under the Supplemental Forms Tab.

By United States Postal Service (USPS) send to: By an express carrier (Fedex, UPS, DHL, etc.,) send to:

Drexel eLearning Drexel eLearning

P.O.

Box 34729 Attn: Applicant Services

Philadelphia, PA 19101

3001 Market St., Suite 18

Philadelphia, PA 19104

table with 10 columns and 12 rows

#

College Code

Institution Name

\*\*Self-reported Institution

Institution Address

Dates Attended

Degree Granted

Major

Degree Granted Date (mm/yyyy)

#  College Code  Institution Name  \*\*Self-reported Institution  Institution Address

Start Date (mm/yyyy)

End Date (mm/yyyy)

Degree Granted

1

2

3

4

5

6

7

8

9

10

table end

\*\* If you could not find your school and had to enter it manually in the search tool it will appear above. Otherwise please disregard this field.

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APPLICATION FOR UNDERGRADUATE ADMISSION Drexel eLearning

Online Nursing and Health Professions Programs

LEGAL INFORMATION

By providing the information in this application, I hereby authorize Drexel and/or its authorized representatives to contact me, including by email and

phone, to further

assist with the application process and to provide more information regarding Drexel University’s programs. My consent is effective for 18 months from the

submission

of this form.

NJ residents: By providing my primary phone number I am indicating the telephone number to which Drexel and/or its authorized representatives, may contact

me by

phone.

Drexel University abides by the provisions of Public Law 93-380: Family Educational Rights and Privacy Act, which grants the student the right to examine

any

admissions file which becomes a part of the student’s permanent “Educational Record.” It is important to understand that “Applicants for Admission” are

not granted

rights under this legislation. However, once an “Applicant for Admission” becomes a “Student” by enrolling and attending Drexel, any admissions file which

becomes a

part of the student’s permanent “Educational Record” becomes available to the student for review.

Applicants should understand that only the transcripts, CEEB, SAT, and Achievement Test Score Reports and those portions of the application generated by

the student

will become part of the student’s permanent “Educational Record” upon enrollment. No other information or material gathered or submitted in the admissions

process

will be retained as part of the student’s permanent “Educational Record.” Therefore, statements or evaluations provided by any individual as part of this

application do

not become part of the student’s permanent “Educational Record” and will not be available for the student’s review.

2249

By checking this box, I hereby certify that I have read and understand the above statement. I further certify that the information given by me on this application

is complete and correct and understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of

acceptance, cancellation of enrollment, or appropriate disciplinary action. I authorize the University to verify the information I have provided. I agree

to notify the proper officials of the institution of any changes in the information provided.

Signature of Applicant Date

Access Privileges and Property Rights

All documents that you submit, or are submitted on your behalf, in support of this application for admission to Drexel University become the property of

the University,

and will under no circumstances be released to you or any other party. In accordance with the provisions of the Family Educational Rights and Privacy Act,

all

admissions decisions are given to the applicant only, in the form of a decision letter from the Office of Admissions. No decisions on applications are revealed

over the

telephone.

Equal Opportunity Policy

It is the policy of Drexel University to provide a working and learning environment in which employees and students are about to realize their full potential

as productive

members of the Drexel community. To this end, Drexel University affirms its commitment to equal opportunity and nondiscrimination in employment and education

for

all qualified individuals regardless of race, religion, color, national origin, sex, age, sexual preference, disability, or applicable veteran status. Further,

Drexel University

pledges to act affirmatively in providing access to employment, benefits, facilities, and other University-administered programs to women and members of

racial and

ethnic minorities in recognition of the many benefits that accrue to the University as a result of their diverse experiences, cultural heritage, and perspectives

that enrich

the University learning experience. All Drexel University employees, administrators, faculty, and staff, as well as students, are expected to cooperate

fully in meeting

these legal and ethical obligations. Inquiries regarding this policy may be directed to the Office of Affirmative Action and Employment Planning, Drexel

University,

3141 Chestnut Street, Philadelphia, PA 19104.

Inquiries regarding this policy may be directed to the Office of Affirmative Action and Employment Planning, Drexel University, 3141 Chestnut Street, Philadelphia,

PA 19104.

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