



Adrian College Canadian Application for Admission

Please return your completed application to:

Adrian College Admissions, Adrian College, 110 South Madison Street, Adrian, MI 49221, USA

Submit official high school transcripts with SAT or ACT scores and official college transcripts if applicable.

You may apply online at www.adrian.edu.

Personal Information

Name	Preferred Name
Address	
City/Province/Postal	
Home Phone ()	SIN
E-mail Address	
I am a United States citizen. <input type="checkbox"/> Yes <input type="checkbox"/> No	I am a permanent U.S. resident. <input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Citizenship	Country of Birth
Date of Birth _____ <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married
If you currently hold a U.S. Visa, indicate type:	Expiration Date

Optional Information

Race - Please check all that apply. Asian White Native Hawaiian or Other Pacific Islander
 Hispanic or Latino Black or African American American Indian or Alaska Native

Religious Preference:

Family Information

I live with Parents A Parent A Parent & Stepparent Guardian(s) Spouse Other

Father's/Stepfather's/Guardian's Name

Address (if different)	
College Attended	Degree Obtained
Employer	Occupation
Work Phone ()	E-mail Address

Mother's/Stepmother's/Guardian's Name

Address (if different)	
College Attended	Degree Obtained
Employer	Occupation
Work Phone ()	E-mail Address

Brothers and sisters currently attending college (list name, college):

Relatives or friends who have attended or are attending Adrian College:

Name	Relationship	<input type="checkbox"/> Attending	<input type="checkbox"/> Attended
Name	Relationship	<input type="checkbox"/> Attending	<input type="checkbox"/> Attended

Academic Information

Currently, my top choice majors/programs are 1. _____ 2. _____

I plan to enter in _____ Year of _____ Fall Semester Spring Semester (transfer students only)

I am applying as a Freshman Transfer Full-time Part-time

High School Information

High School Name _____ Graduation Year _____ Public Private
Address _____
City/Province/Postal _____
Name of Guidance Counselor _____
His/Her Office Phone () _____ Fax _____

College Information

College(s) attended (if any) _____
College most recently attended _____
Date Attended _____ Degree(s) Earned _____
Total transfer hours completed _____ Cumulative GPA _____
Total transfer hours now enrolled _____ Anticipated GPA _____

Test Record

I have taken the SAT. Yes No I will retake the SAT. Yes No Date _____
I have taken the ACT. Yes No I will retake the ACT. Yes No Date _____

The ACT College Code for Adrian is #1954. The SAT College Code is #1001.

*If English is not your first language you must take the TOEFL and submit official scores to Adrian College

Personal Interests

Varsity Sports Played Football Baseball Soccer
 Softball Basketball Volleyball
 Golf Track/Cross-Country Cheer/Dance
 Tennis Synchronized Skating Ice Hockey
Cocurricular Newspaper Radio Marching Band
 Theatre Choir Yearbook
 Student Government Other _____
Student Organizations Community Service Honors Society Foreign Language
 Religious Life Other _____

Financial Aid Information

I plan to apply for Financial Assistance. Yes No
Through (ex. OSAP) _____

My signature authorizes my high school to provide official transcripts and test scores to Adrian College.

Signature of Applicant _____ Date _____

I certify that the information given on this application is complete and accurate to the best of my knowledge. I understand that all documents submitted become the property of Adrian College. I understand that any misrepresentation of information on this form could render me subject to immediate dismissal from the College.

