



MOUNT ST. JOSEPH UNIVERSITY

ADULT UNDERGRADUATE STUDENT APPLICATION

Please complete the entire application. Please type or print. You can apply online at www.msj.edu/apply. The Mount defines an adult student as one who has been out of high school for four or more years at the time of enrollment. A \$25.00 nonrefundable application fee payable to Mount St. Joseph University must be included with this application.

PERSONAL BACKGROUND (Please type or print)

Name _____
Last First Middle Maiden (Past/Previous Names) Preferred First

Mailing Address _____
Street City State Zip Country

Permanent Address _____
(if different from mailing address) Street City State Zip Country

E-mail _____

Phone: _____ May we text you? ☐ Yes ☐ No
Day Evening Cell

Gender: ☐ Male ☐ Female Date of Birth _____
Month Day Year

Are you a U.S. citizen? ☐ Yes ☐ No Are you a U.S. permanent resident? ☐ Yes ☐ No

If a non-resident alien, what is: 1) your country of birth? _____ 2) your country of citizenship? _____

Do you consider yourself to be Hispanic/Latino/Spanish origin? ☐ Yes ☐ No

In addition, select one or more of the following racial categories to describe yourself:

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American
☐ Native Hawaiian or Pacific Islander ☐ White (non-Hispanic) ☐ Declined to Answer

Academic Information

Date of Enrollment _____ ☐ Fall ☐ Spring ☐ Summer

Have you attended college previously? ☐ Yes ☐ No

Will you be taking courses as part of a Mount off-site program? ☐ Yes ☐ No If yes, location: _____

Enrolling as: ☐ Part-time ☐ Full-time

Degree you intend to receive ☐ Associate degree ☐ Bachelor Degree ☐ Certificate

Intended Major (if undeclared, please indicate) _____

Go to www.msj.edu/academics for a complete list of majors. Note: Not all majors are offered in all time frames.

Are you interested in obtaining an Adolescent-to-Young Adult Teaching License (grades 7-12)? ☐ Yes ☐ No

Are you interested in pursuing a graduate degree in any of the following:

☐ Pre-Art Therapy ☐ Pre-Dentistry ☐ Pre-Optometry ☐ Pre-Public Health
☐ Pre-Athletic Training ☐ Pre-Law ☐ Pre-Pharmacy ☐ Pre-Speech
☐ Pre-Audiology ☐ Pre-Medicine ☐ Pre-Physical Therapy ☐ Language Pathology
☐ Pre-Behavioral & Mental Health ☐ Pre-Occupational ☐ Pre-Physician Assistant ☐ Pre-Veterinary
☐ Pre-Chiropractic ☐ Therapy ☐ Pre-Podiatry ☐ Science

Will you be applying for financial aid? ☐ Yes ☐ No

Academic History

High School _____
Name City State Country Dates Attended (Month/Yr.-Month/Yr.)

List all colleges/universities you have attended. City/State/Country Dates Attended (MM/YYYY-MM/YYYY) Degrees (if any)

Note: Transfer credits are only accepted from regionally accredited institutions.

Employment

Place of Employment _____ City _____ State _____ Country _____
Position/Title _____ Business Phone _____

Additional Information

Does your employer provide tuition reimbursement? ☐ Yes ☐ No

Are you currently serving or a veteran of the U.S. Armed Forces? ☐ Yes ☐ No

Are you a dependent of a veteran of the U.S. Armed Forces? ☐ Yes ☐ No

Do you plan to use VA benefits at the Mount? ☐ Yes ☐ No

Religious Preference: _____ ☐ Decline to Answer

Who has told you about us? (Please check all that apply.)

- ☐ Career counselor ☐ MSJ admission counselor
☐ College advisor ☐ MSJ alumni
☐ Employer/Coworker ☐ MSJ faculty/staff
☐ Friend/Family member ☐ MSJ student
☐ Other _____

Where have you seen us? (Please check all that apply.)

- ☐ Billboard ☐ Facebook ☐ Radio
☐ Brochure/Postcard ☐ Instagram ☐ Search engine result
☐ Career fair ☐ Internet ad ☐ TV
☐ College fair ☐ LinkedIn ☐ Twitter
☐ Conference ☐ Newspaper/Magazine ☐ Website ad
☐ Email ☐ Other _____

In the space below, please indicate if there is any part of your academic record that might need clarification or explanation.

The Mount has permission to use my name and related information if a scholarship is awarded and/or my application is accepted.

☐ Yes ☐ No (Please check one.)

Have you ever been expelled or required to withdraw for academic and/or disciplinary reasons from any high school or college?

☐ Yes ☐ No

Have you been convicted of a felony? ☐ Yes ☐ No

If you answered "yes" to either of the last two questions, please forward relevant information on this matter to the Dean of Admission.

Criminal background checks may be required to determine eligibility for admission into some programs and/or field placement, practicum or clinical assignments. Some misdemeanor offenses may justify the denial of admission into a licensure program or access to practicum or clinical assignments. A record of prior criminal conviction(s) will not necessarily be a bar to admission to the University. The University will take into account such factors as the nature and seriousness of the offense, the age of the offense, and any evidence that the potential student has successfully engaged in efforts to be held accountable or to rehabilitate.

SIGNATURE SECTION

I certify that the information which I have provided is complete and accurate to the best of my knowledge. I understand that falsification may result in denial of admission or dismissal from Mount St. Joseph University. If I am accepted by Mount St. Joseph University and choose to enroll, I understand that I will be expected to abide by all University rules and regulations.

Note: By completing and signing this application, students who attend the Mount give the University permission to use his/her photographs and/or digital media for marketing purposes, both on the website and in print materials. The photographs and digital media become the property of the University and are only used to promote the Mount.

PLEASE NOTE: The review of your application will not occur until all relevant information is received.

Signature of Applicant _____

Date: Month/Day/Year _____

Submit all application materials to:

Mount St. Joseph University, Office of Admission, 5701 Delhi Road, Cincinnati, Ohio 45233

Mount St. Joseph University reports aggregated data to the U.S. Department of Education on: Gender, Race, and Religious Affiliation.



**MOUNT ST. JOSEPH
UNIVERSITY**

Office of Admission
5701 Delhi Road
Cincinnati, OH 45233-1670
513-244-4531 | 800-654-9314
www.msjeu.edu | admission@msjeu.edu

Mount St. Joseph University ("the University") is committed to providing an educational and employment environment free from discrimination or harassment on the basis of race, color, national origin, religion, sex, age, disability, sexual orientation, gender identity, or other minority or protected status. This commitment extends to the University's administration of its admission, financial aid, employment, and academic policies, as well as the University's athletic programs and other University-administered programs, services, and activities.

The University has designated the chief compliance and risk officer, 513-244-4393, Office of the President, as the individual responsible for responding to inquiries, addressing complaints, and coordinating compliance with its responsibilities under Title IX of the Education Amendments of 1972 and other applicable federal and state civil rights laws. The University has designated the director of Learning Center & Disabilities Services, 513-244-4524, as the individual responsible for responding to inquiries, addressing complaints, and coordinating compliance with its responsibilities under Section 504 of the Rehabilitation Act of 1973.

09-WO-002031/21

(Page 2 of 2)