

Application for Admission – Page 1



**WARNER
PACIFIC
COLLEGE**

**ADP | ADULT DEGREE
PROGRAM**

I am applying for the following program:

- | | |
|---|--|
| <input type="checkbox"/> Associate of Arts in Organizational Dynamics | <input type="checkbox"/> Master of Science in Management and Organizational Leadership |
| <input type="checkbox"/> Bachelor of Accounting | <input type="checkbox"/> Master of Arts in Teaching |
| <input type="checkbox"/> Bachelor of Business Administration | <input type="checkbox"/> Minor in Human Resource Management |
| <input type="checkbox"/> Bachelor of Science in Human Development | <input type="checkbox"/> Minor in Sales and Marketing |
| <input type="checkbox"/> Bachelor of Health Care Administration | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Master of Education | |

Location: East Portland West Portland Vancouver Other _____

_____ Date _____

_____ Last Name _____ First _____ Former/Maiden _____ Middle _____

_____ Street Address _____

_____ City _____ State _____ ZIP _____

_____ Home Phone _____ Work Phone _____ Cell Phone _____

_____ Personal E-mail _____ Work E-mail _____

Social Security Number _____ Date of Birth _____

High School Attended _____ City _____ State _____

High School Graduation Year _____ Diploma GED

Have you previously *applied and been denied admission to Warner Pacific*? Yes No

If yes, please provide dates and the name under which you previously applied: _____

Have you previously *been enrolled at Warner Pacific*? Yes No

If yes, please provide dates and the name under which you were enrolled: _____

Are you interested in applying for: Government Loans Grants VA Benefits

Will your current employer reimburse you for tuition? Yes No Unsure Amount _____

When do you plan to begin class? (Month) _____

Academic Information

List below all colleges or universities you have attended. Please provide the date(s).

College/University	City/State	Semester Hours	Degree Received	Dates
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Office Use Only
Rep. _____ Grp. _____ Ant. Start _____ DT# _____ Date _____

Please go to the reverse side to complete the application.

Application for Admission – Page 2

Military Education

Branch _____ Years _____ Current Rank _____

Discharge Type _____

Active Duty Retired Active Reserve Separated

Do you have a DD214? Yes No Do you have a DD295? Yes No
If yes, please forward it with your application.

Have you completed USAFI, DANTES, or GED exams? Yes No
If yes, please forward it with your application.

Employment History

Current Employer _____ Current Position _____

_____ Date of Hire ___/___/___ Full-Time or Part-Time (circle one)

Employer Address _____ City _____ State _____

Previous Employer _____ Position _____ Employment Dates _____

Federal and College Reporting

Church Affiliation (If applicable): _____

Home Church Name

Denomination

Gender: Male Female

Optional: *Any information you provide here is optional and will not be used in a discriminatory manner.*

Ethnic Origin: Race/Ethnicity Unknown White/Caucasian Black/African American
 Asian Hispanic/Latino Two or More Races
 Native Hawaiian/Pacific Islander Native American/Alaska Native

Marital Status: Single Married Other

Are you a U.S. citizen? * Yes No If no, indicate country of citizenship. _____

* Note: If you are not a U.S. citizen, send our office a copy of your permanent residency status.

Disciplinary History

Yes No Have you ever been convicted of or pleaded nolo contendere (no contest) to a misdemeanor, felony or other crime? (Note: You are not required to include in your answer crimes for which the record has been officially sealed, expunged or eradicated by law.)

Yes No Since turning 17, have you ever been expelled, suspended, dismissed from, or placed on probation at any educational institution for any disciplinary violation?

If you answered yes to either or both of the questions, please provide details and dates on a separate sheet of paper.

I certify that all information I have submitted in this application process, including my application and any supporting materials, is complete, factual correct and honestly represented. I understand that I may be subject to disciplinary action, including but not limited to revocation of my admission or expulsion for providing any false or misleading information.

Student Signature _____ Date _____

Notice of Nondiscriminatory Policy as to Students

Warner Pacific College is committed to a policy of nondiscrimination as to students and does not discriminate against students on the basis of race, color, national origin, age, sex, gender, sexual orientation (including gender identity), disability, veteran status or any other legally protected status.

An application fee of \$45 must accompany this application. This fee covers the evaluation and processing of your transcripts and other documents.

I understand that the program registration fee and application fee is nonrefundable. I understand that I must submit official college/university transcripts from every institution I have attended. Also, I acknowledge that I have provided accurate and truthful information in completing this application for admission.

Request for Official Transcript



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Student Name _____ Phone _____
Name on transcript if different (maiden/other name).

Address _____
Street City State ZIP

School Attended _____
City State

Date of Enrollment _____
From To

Social Security Number _____ Date of Birth _____

Student Signature _____ Date _____

Mail official transcript to:

Warner Pacific College
Adult Degree Program
2600 SE 98th Ave.
Suite 200
Portland, OR 97266

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