



Student Status (check one): Freshman Transfer
Attending (check one): Full-time Part-time
Housing (check one): On-campus Commuter (with parents)
 Commuter (off campus)
Entering (check one): Fall Term 20____ Spring Term 20____
Financial Aid (check one): I plan to apply I will not apply

APPLICATION FOR ADMISSION

PERSONAL INFORMATION

Legal Name (last, first, middle): _____ Male Female

Preferred Name (Nickname): _____

Permanent Street Address: _____

City: _____ State: _____ Zip: _____ County: _____

Cell Phone (include area code): _____ Home Phone (include area code): _____

Full Birth Date: _____ Social Security Number: _____ Email Address: _____

Citizenship: US Citizen US Permanent Resident; Citizen of: _____

Other Citizenship Country: _____ Visa Type: _____

Are you or have you ever been a member of the United States military? Yes No

Please indicate the branch(s) you serve(d) or are preparing to enlist in: _____

Are you eligible to participate in the Yellow Ribbon GI Education Enhancement Program? Yes No Not Sure

Have you ever been convicted of or pled guilty to a crime (other than a summary traffic offense)? Yes No

If yes, please briefly explain (Include separate sheet if necessary): _____

PARENT/GUARDIAN INFORMATION

Name (last, first, middle): _____ Name (last, first, middle): _____

Street: _____ Street: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Relationship: Mother Father Guardian

Relationship: Mother Father Guardian

College Graduate? Yes No Institution: _____

College Graduate? Yes No Institution: _____

Is either parent an active pastor in a Lutheran church? Yes No If yes, please identify church: _____

Are you an active member of a Lutheran church? Yes No If yes, please identify church: _____

RELATIVES WHO ARE ATTENDING OR HAVE GRADUATED FROM THIEL COLLEGE

Name: _____ Class: _____ Relationship: _____

Name: _____ Class: _____ Relationship: _____

Name: _____ Class: _____ Relationship: _____

EDUCATIONAL INFORMATION

HIGH SCHOOL

GED Certificate? Yes No

School Name: _____ Guidance Counselor: _____ Phone: _____

Graduation Year: _____ Full Address: _____ Country: _____

OTHER COLLEGES OR UNIVERSITIES

College/University Name: _____ City: _____ State: _____ Zip: _____

Dates Attended: _____ Degree(s) Earned: _____

College/University Name: _____ City: _____ State: _____ Zip: _____

Dates Attended: _____ Degree(s) Earned: _____

MAJORS/FIELDS OF STUDY: Please check the box next to the major/field of study you are presently considering.

- | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Accounting
<input type="checkbox"/> Actuarial Studies (BS)
<input type="checkbox"/> Binary Engineering (BA/BS)
<input type="checkbox"/> Biology
<input type="checkbox"/> Biology/Conservation
<input type="checkbox"/> Biology/Forestry & Environmental Management
<input type="checkbox"/> Biology/Pre-Dental
<input type="checkbox"/> Biology/Pre-Medical
<input type="checkbox"/> Biology/Pre-Occupational Therapy
<input type="checkbox"/> Biology/Pre-Optometry
<input type="checkbox"/> Biology/Pre-Physical Therapy
<input type="checkbox"/> Biology/Pre-Physician Assistant
<input type="checkbox"/> Biology/Pre-Podiatry
<input type="checkbox"/> Biology/Pre-Veterinary
<input type="checkbox"/> Biology/Secondary Education
<input type="checkbox"/> Business Administration/Advertising
<input type="checkbox"/> Business Administration/Culinary Arts | <input type="checkbox"/> Business Administration/Fashion & Retail Management
<input type="checkbox"/> Business Administration/Finance
<input type="checkbox"/> Business Administration/General
<input type="checkbox"/> Business Administration/HR
<input type="checkbox"/> Business Administration/Management
<input type="checkbox"/> Business Administration/Marketing
<input type="checkbox"/> Business Administration/Mortuary Science
<input type="checkbox"/> Business Communication
<input type="checkbox"/> Chemistry
<input type="checkbox"/> Chemistry/ACS Certification (BS)
<input type="checkbox"/> Chemistry/Biochemistry
<input type="checkbox"/> Chemistry/Environmental
<input type="checkbox"/> Chemistry/Pre-Dental
<input type="checkbox"/> Chemistry/Pre-Medical
<input type="checkbox"/> Chemistry/Pre-Pharmacy
<input type="checkbox"/> Chemistry/Secondary Education
<input type="checkbox"/> Commercial Art | <input type="checkbox"/> Communication Sciences & Disorders (BA/BS)
<input type="checkbox"/> Communication Studies
<input type="checkbox"/> Computer Science
<input type="checkbox"/> Criminal Justice Studies
<input type="checkbox"/> Cytotechnology
<input type="checkbox"/> E-Commerce (BS)
<input type="checkbox"/> Early Childhood/Special Education
<input type="checkbox"/> English/Literature
<input type="checkbox"/> English/Secondary Education
<input type="checkbox"/> English/Writing
<input type="checkbox"/> Environmental Science (BS)
<input type="checkbox"/> Fine Art
<input type="checkbox"/> Forensic Accounting
<input type="checkbox"/> General Science/Secondary Education
<input type="checkbox"/> History
<input type="checkbox"/> International Business
<input type="checkbox"/> Management Information Systems (BS) | <input type="checkbox"/> Mathematics
<input type="checkbox"/> Mathematics/Secondary Education
<input type="checkbox"/> Media Communication
<input type="checkbox"/> Medical Technology
<input type="checkbox"/> Neuroscience
<input type="checkbox"/> Parish Education
<input type="checkbox"/> Philosophy
<input type="checkbox"/> Physics (BS)
<input type="checkbox"/> Physics/Secondary Education
<input type="checkbox"/> Political Science
<input type="checkbox"/> Political Science/Pre-Law
<input type="checkbox"/> Psychology
<input type="checkbox"/> Religion
<input type="checkbox"/> Social Studies/Secondary Education
<input type="checkbox"/> Sociology
<input type="checkbox"/> Theology & Youth Ministry
<input type="checkbox"/> Undecided/Exploratory
<input type="checkbox"/> Web Development (BS) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

ACTIVITIES: Please list activities in which you participated, the number of years you were involved, and any special recognition or awards below. Please check the box next to any activities you would like to continue in college (Please attach additional documents as needed).

(activity/award)	<input type="checkbox"/> (# yrs.)	(activity/award)	<input type="checkbox"/> (# yrs.)	(activity/award)	<input type="checkbox"/> (# yrs.)
(activity/award)	<input type="checkbox"/> (# yrs.)	(activity/award)	<input type="checkbox"/> (# yrs.)	(activity/award)	<input type="checkbox"/> (# yrs.)

PERSONAL STATEMENT: Here is your opportunity to impress us even more! On a separate sheet of paper tell us about an achievement or ability not reflected elsewhere in your application for admission.

OPTIONAL INFORMATION

Your responses are voluntary, will be kept confidential, and will not be used in the admission decision.

ETHNICITY: If you wish to be identified with a particular ethnic group, please select the choice(s) that most accurately describe your heritage.

- | | | | |
|--------------------------------------------------------------------|--------------------------------|----------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Black or African American | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> White | <input type="checkbox"/> Two or More Races | <input type="checkbox"/> Unknown |

RELIGIOUS PREFERENCE: _____ None

APPLICATION CHECKLIST:

APPLICATION AGREEMENT

Freshman:

- A completed admissions application
- Official high school transcript or GED
- Official SAT or ACT scores

Transfer:

- A completed admissions application
- Official college transcripts
(from all colleges attended)
- Transfer Referral Form
- Official high school transcript or GED
(If you have earned fewer than 30 college credits)
- Official SAT or ACT scores
(If you have earned fewer than 12 college credits)

Military (in addition to above):

- Military experience transcript
- DD214 (if applicable)
- Certificate of Eligibility

Please read carefully and sign as indicated.

Attendance at Thiel College is a privilege. In order to uphold the ideals of scholarship and sound moral character, Thiel College requires all members of the academic community to behave responsibly and to adhere to the code of student conduct. Thiel College reserves the right, and the student concedes to the college the right, to enforce the code of student conduct through the appropriate sanctions, including dismissal of the student at any time and for any reason deemed sufficient. Further, I authorize the college to use data in admissions processes, for purposes of advising, and in reports as may be necessary to assure opportunity for all students, principally with regard to the federal and state programs of financial assistance.

I agree to comply with all regulations and requirements and to cooperate with the administrative officers, faculty and my fellow students in maintaining high standards of conduct and scholarship and in promoting the general welfare of the college. All information is true and complete to the best of my knowledge.

Applicant Signature: _____ Date of Application: _____

SUBMIT TO: Thiel College, Office of Admissions, 75 College Avenue, Greenville, PA 16125 • Fax 724-589-2013 • admissions@thiel.edu

Once the Office of Admissions has received all of your materials, your file will be thoroughly reviewed and you may expect a decision will be made within two weeks. In special circumstances we may request more information or a personal interview. You will be notified of the admission decision in writing via mail.

You may also apply online at www.thiel.edu or at the Common Application website: www.commonapp.org.