



# Goldey-Beacom College

4701 Limestone Road • Wilmington, Delaware 19808 • www.gbc.edu

## APPLICATION FOR ADMISSION

### PERSONAL DATA

Name \_\_\_\_\_  
Last First Middle Maiden

Address \_\_\_\_\_  
Street Apt / Unit

\_\_\_\_\_ City State Zip Code

Telephone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ Employer \_\_\_\_\_  
Home Work

Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security \_\_\_\_\_  
Month Day Year

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ Green Card? Yes \_\_\_\_\_ No \_\_\_\_\_

Neighborhood Newspaper \_\_\_\_\_ Email: \_\_\_\_\_

### PARENTAL INFORMATION (if student is under the age of 18)

Father's Name \_\_\_\_\_ Father's Occupation \_\_\_\_\_

Education: \_\_\_\_H.S. Diploma \_\_\_\_Associate's Degree \_\_\_\_Bachelor's Degree \_\_\_\_Advanced Degree

Mother's Name \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Education: \_\_\_\_H.S. Diploma \_\_\_\_Associate's Degree \_\_\_\_Bachelor's Degree \_\_\_\_Advanced Degree

With whom do you reside? \_\_\_\_Both Parents \_\_\_\_Mother \_\_\_\_Father \_\_\_\_Other

Address (if different from above) \_\_\_\_\_  
Street Apt / Unit

\_\_\_\_\_ City County State Zip Code

Please list other colleges to which you are applying: \_\_\_\_\_

### PROGRAM INFORMATION

Entering Freshman     Transfer     Non-degree

Full-time (12 + credits)     Part-time (fewer than 12 credits)

Entrance Date     Fall Semester 20\_\_\_\_     Spring Semester 20\_\_\_\_     Summer Session 20\_\_\_\_

Referral Source - The Admissions Office is interested in knowing how you learned about Goldey-Beacom College:  
*(Please Check One)*

Goldey-Beacom College student (Name \_\_\_\_\_)

Admissions Representative

Advertising:     Campus Sign     Radio     Newspaper     Other \_\_\_\_\_

Open House

College Fair

Alumnus (Name: \_\_\_\_\_ Address: \_\_\_\_\_)

Guidance Office (Counselor's Name \_\_\_\_\_)

Faculty Member (Name: \_\_\_\_\_ School: \_\_\_\_\_)

Relative

Other \_\_\_\_\_

# CURRICULUM OF STUDY

## Bachelor of Science

- Accounting
- Accounting & Information Systems (Honors Program)
- Business Administration with a concentration in:
  - Finance Management
  - Finance Management (Honors Program)
  - Human Resource Management
  - International Business Management
  - Management
  - Management (Honors Program)
  - Management Information Systems
  - Marketing Management
  - Marketing Management (Honors Program)
  - Society and Culture
- Computer Information Systems

## Associate in Science

- Accounting
- Business Administration
- Management
- Computer Information Systems

## Special

- Non-degree

# EDUCATIONAL BACKGROUND

High Schools Attended:

School Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
County \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Graduation Date: \_\_\_\_\_

If you did not complete high school, do you have a GED?

Colleges You Have Attended:

College Name \_\_\_\_\_  
 Full-time or  Part-time  
Extension or branch \_\_\_\_\_  
Street \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
County \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Degree Granted \_\_\_\_\_

(Attach a separate sheet if necessary)

Previous attendance at Goldey-Beacom College:

Dates attended \_\_\_\_\_  
Degree program \_\_\_\_\_  
Name while attending (if different) \_\_\_\_\_

High Schools Attended:

School Name \_\_\_\_\_  
Street \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
County \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Graduation Date: \_\_\_\_\_

Yes  No Year Obtained \_\_\_\_\_

Colleges You Have Attended:

College Name \_\_\_\_\_  
 Full-time or  Part-time  
Extension or branch \_\_\_\_\_  
Street \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
County \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Degree Granted \_\_\_\_\_

(Attach a separate sheet if necessary)

Day or Evening Division \_\_\_\_\_  
Degree Granted \_\_\_\_\_

# FINANCIAL AID

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Are you applying for Financial Aid?                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will you be covered by Veteran Benefits?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will you be covered by State Rehabilitation?           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will you be covered by Employer Tuition Reimbursement? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

## HOUSING

- College Housing                       Commuter

## STUDENT ACTIVITIES

High School activities that I have participated in: *(Sports, Clubs, Etc.)* \_\_\_\_\_

I would like to participate in the following activities:

- |   |   |
|---|---|
| <input type="checkbox"/> Men's Basketball   | <input type="checkbox"/> Student Host Committee                         |
| <input type="checkbox"/> Women's Basketball | <input type="checkbox"/> Student Government                             |
| <input type="checkbox"/> Men's Soccer       | <input type="checkbox"/> Fraternities                                   |
| <input type="checkbox"/> Women's Soccer     | <input type="checkbox"/> Sororities                                     |
| <input type="checkbox"/> Volleyball         | <input type="checkbox"/> International Student Association              |
| <input type="checkbox"/> Softball           | <input type="checkbox"/> Faith-based Organizations                      |
| <input type="checkbox"/> Cross Country      | <input type="checkbox"/> Resident Student Association                   |
| <input type="checkbox"/> Golf               | <input type="checkbox"/> Student Chapters of Professional Organizations |
| <input type="checkbox"/> Intramural Sports  |   |
| <input type="checkbox"/> Women's Tennis     |   |

Information for U.S. Department of Education Reports - response is strictly voluntary

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Black/Non-Hispanic | <input type="checkbox"/> American Indian    | <input type="checkbox"/> Asian or Pacific Islander |
| <input type="checkbox"/> Hispanic           | <input type="checkbox"/> White/Non-Hispanic | <input type="checkbox"/> Multi-Racial              |

Enclosed is my \$30 application fee payable to Goldey-Beacom College. I understand that this fee is non-refundable.

I certify that the information submitted is complete and accurate. Goldey-Beacom College is an equal opportunity educational institution. This application is a confidential document.

I understand that it is my responsibility to arrange for the forwarding of official transcripts of records from all secondary and postsecondary schools that I have attended, and that such transcripts and other application materials will become the property of Goldey-Beacom College. I will contact the Admissions Office immediately if I foresee difficulty in obtaining the required documentation.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant's Signature                      Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of Parent  
or Legal Guardian  
(If applicant is under 18 years of age)                      Date

# FOR OFFICIAL USE ONLY

## HIGH SCHOOL INFORMATION

High School Name \_\_\_\_\_  
CEEB Code \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ HS Transcrip Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_  
Yr of Grad. \_\_\_\_/\_\_\_\_/\_\_\_\_ Final HS Transcript \_\_\_\_/\_\_\_\_/\_\_\_\_  
GED Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_  
TSWE \_\_\_\_\_ SAT Verbal \_\_\_\_\_ SAT Math \_\_\_\_\_ SAT Writing \_\_\_\_\_ HS Avg \_\_\_\_\_ Rank \_\_\_\_\_ TOEFL \_\_\_\_\_

## COLLEGE INFORMATION

NAME (Reverse Chronological Order)	CODE	TRANS. DATE	FINAL DATE
_____	____/____/____	____/____/____	____/____/____
_____	____/____/____	____/____/____	____/____/____
_____	____/____/____	____/____/____	____/____/____
_____	____/____/____	____/____/____	____/____/____

CT AVG. \_\_\_\_\_

## BUSINESS OFFICE

Applied \_\_\_\_/\_\_\_\_/\_\_\_\_ (\$ \_\_\_\_\_.) \_\_\_\_\_  
Deposit \_\_\_\_/\_\_\_\_/\_\_\_\_ (\$ \_\_\_\_\_.) \_\_\_\_\_

## ADMISSIONS OFFICE

CNSLR CODE \_\_\_\_\_ MAJOR CODE \_\_\_\_\_

	STATUS	CNSLR
Non-degree ____/____/____	(_____)	_____
Conditional ____/____/____	(_____)	_____
Acceptance ____/____/____	(_____)	_____
Rejected ____/____/____	(_____)	_____
Reactivate ____/____/____	(_____)	_____
Cancel ____/____/____	(_____)	_____
TMATE ____/____/____	(_____)	_____
Entered ____/____/____		