

PLEASE COMPLETE AND MAIL TO:

YOU MAY ALSO APPLY ONLINE AT:

VALPARAISO UNIVERSITY Undergraduate Admission Duesenberg Welcome Center 1620 Chapel Drive Valparaiso, IN 46383

valpo.edu/apply

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Please enter your name exactly as it appears on your passport and/or other official documents.

Name:					
	FIRST/GIVEN NAME	MIDDLE NAME (COMPLETE)	LAST/FAMILY NAME		
Preferred Name:		Former Last Name (if any):			
Birth Date (MM/DD/	YYYY):	Sex: 🗆 Male 🖵 Female	_ Sex: □ Male □ Female		
Gender:		Pronouns:			
Address:					
	NUMBER AND STREET		APARTMENT NUMBER		
CITY OR TOWN	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY		
Home Phone:		Cell Phone:			
☐ I give permission t	to Valparaiso University to send me	e important updates via text messaging.			
Email Address:		Social Security Nun	nber:		
(For official University corresp		(Required if you plan to file	the FAFSA - Free Application for Federal Student Aid. ted States citizens/permanent residents only)		
Religious Denominat	ion:				



# PERSONAL INFORMATION (CONTINUED)

#### **ETHNICITY**

Are you Hispanic or Latino? ☐ Yes	□ No				
Please check all that apply:					
☐ American Indian or Alaska Nativ	е	☐ Black or African American			
☐ Native Hawaiian or Other Pacific	: Islander	☐ White or Caucasian	☐ Other:		
CITIZENSHIP Select one and pro	vide details.				
☐ U.S. Citizen	☐ U.S. Permar	nent Resident	☐ Not a U.S. Citizen or Permanent Resident		
PLACE OF BIRTH	COUNTRY OF CITIZEN	NSHIP	COUNTRY OF CITIZENSHIP		
	U.S. ALIEN REGISTRA	TION NUMBER	VISA STATUS		
	COUNTRY OF BIRTH		COUNTRY OF BIRTH		
YOUR FAMILY INFO		NI.			
YOUR FAMILY INFO	RIVIATIO	N			
PARENT/LEGAL GUARDIAN 1	Please only en	ter information for parents w	ho are still living.		
Name:			Relationship:		
, , , , ,	,				
Cell i florie.		Email Address.			
PARENT/LEGAL GUARDIAN 2	2				
Name:			Relationship:		
TITLE (DR., MR., MRS., ETC.), FIRST/GIV	EN, LAST/FAMILY NAME		·		
Address:		Home Phone:			
Cell Phone:		Email Address:			
Do you have a parent who is a full-	time rostered, p	professional Lutheran church	worker?		
Do you have any relatives who have	e attended or a	re attending Valparaiso Univ	ersity?		
If yes, please provide their name a	nd relationship	to you:			
		NAME/RELATIONSHIP			
		NAME/RELATIONSHIP			
<b>SIBLINGS</b> Please provide the follo	owing information	on:			
RELATIONSHIP AND CURRENT AGE RELATIONSHIP A		DNSHIP AND CURRENT AGE	RELATIONSHIP AND CURRENT AGE		
FIRST/GIVEN AND LAST NAME	FIRST/G	IVEN AND LAST NAME	FIRST/GIVEN AND LAST NAME		
SCH00L	SCH00	 L	SCHOOL		

## YOUR EDUCATION

**HIGH SCHOOL INFORMATION** Please enter information for the high school from which you will graduate.

Name:	Date of Graduation:				
Address:			APARTMEN	NUMBER	
CITY OR TOWN STATE/F	PROVINCE	ZIP/ POSTAL CODE	COUNTRY		
☐ Check here if you are currently homeschooled.	Date G	ED Received (General Equiva	ılency Diploma):		
SCHOOL COUNSELOR INFORMATION					
Name:	Email A	Address:			
COLLEGES/UNIVERSITIES ATTENDED If you requested information below.	u are workin	ng toward or have obtained an	ny prior college credits, plea	se provide the	
COLLEGE NAME	CITY OR TO	OWN	STATE/PROVINCE		
DATES ATTENDED (MONTH/YEAR TO MONTH/YEAR)	UNITS/CR	EDITS COMPLETED	UNITS/CREDITS IN PROGRESS		
<b>TESTS</b> Valparaiso University does not require U.S submit one, please complete the questions below		submit a standardized exam	for admission. However, if y	ou plan to	
Have you taken the SAT?	☐ Yes	Please indicate dates taken	Month/Year)		
	☐ No	When do you expect to do	so? (Month/Year)		
Have you taken the ACT?	☐ Yes	Please indicate dates taken	(Month/Year)		
	☐ No	When do you expect to do	so? (Month/Year)		
Have you taken the TOEFL or IELTS?	☐ Yes	Please indicate dates taken	(Month/Year)		
(international students only)	□ No	When do you expect to do	so? (Month/Year)		
ACADEMIC HONORS					
Briefly list or describe any scholastic distinctions o Society, etc.).	r honors yo	u have achieved since the nin	nth grade (e.g., National Me	rit, Cum Laude	
ENROLLMENT					
When do you plan to enroll? ☐ Spring 2022 ☐	Summer 20	022 🗖 Fall 2022 🗖 Sprii	ng 2023 🗖 Summer 2023	☐ Fall 2023	
What is your area of academic interest?					
What is your intended career path?					
Do you plan to apply for financial aid by completing (United States citizens and United States permanent resistance)		Application for Federal Stude	ent Aid (FAFSA)? ☐ Yes	. □ No	
How did you hear about Valpo?					

## **EXTRACURRICULAR ACTIVITIES** Please list the activities you participated in during high school and indicate the corresponding school year(s). □ 9th □ 10th □ 11th □ 12th □ 9th □ 10th □ 12th □ 11th □ 9th □ 10th □ 11th □ 12th □ 9th □ 10th □ 11th □ 12th □ 9th □ 10th □ 11th □ 12th Please list any activities below that you plan to participate in at Valparaiso University. WRITING SAMPLE GOOD NEWS! You don't need to submit a new essay. Instead, please type a personal statement of at least 250 words. Please choose one of the topics listed below and attach it to your application. 1. Describe the ways you anticipate your Valpo experience will affect your life's personal journey. 2. Evaluate a significant experience or achievement that has special meaning to you. 3. Indicate a person who has had a significant influence on you and describe that influence. 4. Discuss your reasons for wishing to pursue a college degree. Have you ever been suspended from any school? ☐ Yes ☐ No (If yes, please provide the approximate dates and explain the circumstances) Have you ever been convicted of a felony? ☐ Yes ☐ No (If yes, please provide the approximate dates and explain the circumstances)

IN ADDITION TO YOUR APPLICATION, PLEASE MAKE SURE YOUR TEST SCORES AND HIGH SCHOOL TRANSCRIPT ARE SENT TO VALPARAISO UNIVERSITY.

I, the undersigned, agree that any information furnished to Valparaiso University, at any time and regardless of whether or not I am accepted as a student at
Valparaiso University, including all information and materials of any kind received by Valparaiso University from any sources, or prepared by anyone at its request,
shall not be disclosed to anyone, including the undersigned, except that an authorized official at the University may at his/her discretion, for official purposes,
disclose any or part thereof to such person as necessary. I certify that all information on my application is complete, factually correct, and honestly presented.

SIGNATURE DATE

## OFFICIAL TRANSCRIPT REQUEST

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lacksquare I do not plan to submit a standardized exam.

#### TO THE APPLICANT:

Please complete this section and give this form to your high school counselor right away. Note: Your official high school transcript and test scores (if submitting) must be received before we can provide an admission decision.

Full Legal Name:				
Ü	FIRST/GIVEN NAME	MIDDLE NAME (COMPLETE)	LAST/FAMILY NAME	
Mailing Address:				
	NUMBER	STREET	APT. #	
CITY	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY	

### TO THE SCHOOL COUNSELOR:

Please submit this student's official transcript, along with this form, to Valparaiso University as soon as possible.

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If you have any questions, please call us at 219.464.5011, or email us at **undergrad.admission@valpo.edu**.

Full Legal Name:			
	FIRST/GIVEN	MIDDLE	LAST/FAMILY
Title/Position:		School/Organization:	
Phone Number: _		Email Address:	
Signature:		Date:	

Your student has already submitted their portion of our application. All we need in order to provide an admission decision is the student's test scores (if they'll be submitting one), along with this form and their official transcript. Thank you in advance for your help!

