

APPLICATION FORM

Nondiscrimination Policy: American Pathways University admits students of any gender, race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national origin in administration of its educational policies, admissions policies, scholarships and loan programs, and athletic and other school-administered programs.

For Registrar's Use Only							
APU	Personal Information	Membership/Affiliations	Academic Record	Transcripts Attached	Financial Resources	IRS 1040 Form	

Date _____ **\$50.00 Registration Deposit** (Application will not be processed without the fee. Please attach your \$50.00 application fee and send this application to the address above.)

Section I: Personal Information	Name: _____		Social Security No. _____		
	First	MI	Last		
	Mailing Address: _____		_____	_____	_____
	Number and Street		Unit No.	City	State
	Home Ph: _____	Work Ph: _____	email _____		
	Area Code + Number	Area Code + Number	Ext		
	Home Address: _____		_____	_____	_____
	Number and Street		Unit No.	City	State
<input type="checkbox"/> Male	<input type="checkbox"/> Female	Birth Date: _____	Birthplace: _____		
Former Name (if applicable—used for identification of academic records): _____					
First		MI	Last		
Alternate Contact Person: _____			Phone: _____		

Section II: Affiliations	HELP Consortium Affiliation:				
	<input type="checkbox"/> None	<input type="checkbox"/> CCESJ	<input type="checkbox"/> ColoUpLift	<input type="checkbox"/> DIUS	<input type="checkbox"/> Denver Rescue Mission
	<input type="checkbox"/> HELP Staff	<input type="checkbox"/> Mercy Ministries	<input type="checkbox"/> 21stCentury	<input type="checkbox"/> URBACAD	<input type="checkbox"/> Mile High Ministries
	Ethnic Origin: Select one category that most accurately reflects your ethnic background (for compliance with the 1964 Civil Rights Act). Disclosure is voluntary, used for statistical analysis, and will not be used in a discriminatory manner. Ethnic categories are those provided by the U.S. Internal Revenue Service.				
	<input type="checkbox"/> Hispanic	<input type="checkbox"/> African-American	<input type="checkbox"/> Asian-American	<input type="checkbox"/> Native-American	<input type="checkbox"/> White
	<input type="checkbox"/> Other: _____				
	Is English your native language? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," What is your primary language? _____)				
	Country of your Citizenship: _____ If other than the U.S.A., answer the following:				
Visa Number:	For Yourself: _____	For Your Parent(s): _____		_____	
Resident Alien Number:	For Yourself: _____	For Your Parent(s): _____		_____	
Card Issue Date:	For Yourself: _____	For Your Parent(s): _____		_____	

Section III: Academic Information	Admission Level: (Check all categories that apply to you.)				
	<input type="checkbox"/> High School Diploma	<input type="checkbox"/> GED	<input type="checkbox"/> Transfer (prior attendance at another college)	<input type="checkbox"/> Special Status (none of the others)	
	List Colleges Previously Attended: (List all colleges and universities you have attended)				
	Dates Attended	Name of Institution	Total Credits Earned		
	_____	_____	_____		
	_____	_____	_____		
	_____	_____	_____		
	Do you intend to transfer these credits? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Have you completed HELP Consortium courses? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	With this Application the following must be attached or ordered? (Check the appropriate square for each)				
<input type="checkbox"/> High School Diploma and Grades Report	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Attached to this Form	<input type="checkbox"/> Ordered to be sent directly to APU		
<input type="checkbox"/> GED Certificate	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Attached to this Form	<input type="checkbox"/> Ordered to be sent directly to APU		
<input type="checkbox"/> College Transcripts	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Attached to this Form	<input type="checkbox"/> Ordered to be sent directly to APU		
<input type="checkbox"/> HELP Consortium Transcripts	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Attached to this Form	<input type="checkbox"/> Ordered to be sent directly to APU		

Section IV: Financial Aid	Do you need financial aid to pay for tuition? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "yes," attach most recent IRS Form 1040 or 1040A. If you are claimed as a dependent, attach tax return of person claiming you as a dependent, e.g., parents or guardian.)				
	Financial Resources: (Indicate the income range of your last Federal 1040 "Adjusted Gross Income/AGI" or of your parents' Form 1040)				
	<input type="checkbox"/> Under \$20,000 (Affiliated 80% or Unaffiliated 55%)	<input type="checkbox"/> \$25,001-30,000 (60% or 35%)	<input type="checkbox"/> \$35,001-40,000 (40% or 15%)		
	<input type="checkbox"/> \$20,000-25,000 (Affiliated 70% or Unaffiliated 45%)	<input type="checkbox"/> \$30,001-35,000 (50% or 25%)	<input type="checkbox"/> Over \$40,000 (30% or 5%)		

Student's Signature	HELP Endorsement Signature	APU Admission Officer's Signature
Please Print Name	Please Print Name	Please Print Name