



Instructions for completing this application *or apply online at apply.life.edu*

*If you are not a U.S. citizen or a permanent resident of the U.S., please stop and contact the Office of New Student Development for an International Packet.

The following documents must be received by the Office of New Student Development by the quarterly deadline:

- A one-time, non-refundable application fee of \$50 U.S. Do not send cash.
- Official transcripts (no copies) from all colleges, universities or professional schools which you have attended or currently attend sent directly to Life University. (No exceptions.)
- Official SAT/ACT scores. If you have less than 14 semester hours or 20 quarter hours of transferable college credit, you must submit recent (taken within 5 years) SAT/ACT scores.
- Official high school transcript or GED if you have less than 60 semester hours or less than 90 quarter hours of college course work.
- Optional Information: By Federal Law, the submission of certain information at the time of application for admission is optional. These items include social security number, ethnicity/race, age, national origin, and gender. *Life University* collects this information for reporting, record keeping, and statistical analysis. *Life University* does not use this information in any way in the admission process. *Life University* is committed to ensuring the privacy and confidentiality of student records.

**Based on your desired program of study, pre-requisites may be required.
Please see the current bulletin for a listing of graduate and chiropractic pre-requisites.**

- For students who desire to enter into the Doctor of Chiropractic program, two letters of recommendation are required.
- For students who wish to enter the graduate program, three letters (on provided forms) of recommendation are required.

Personal

Full Legal Name _____
last first m.i. date of birth (mm/dd/yy)

Previous (Maiden) Name(s) _____

Present Mailing Address _____
street address city county state ZIP code

Permanent Mailing Address _____
street address city county state ZIP code

Telephone Numbers: Home _____ Business _____ Cell _____

E-mail Address _____

Social Security Number _____

Gender Male Female

Ethnicity American Indian/Alaska Native Asian/Pacific Islander Black, Non-Hispanic
 White, Non-Hispanic Hispanic Unspecified

Enrollment and Program Information

Undergraduate

(If planning to enter the Undergraduate Program, check your desired program of study)

- BBA Business Management
- BS Biology
- BS Nutrition
- AS Nutrition Technology
- BS Dietetics
- BS Psychology
- BS Biopsychology
- AS Coaching Psychology
- BS Computer Information Management
- AS Computer Information Management
- Pre-Chiropractic
- Non-Matriculated (non-degree seeking)

Masters of Sport Health Science

(If planning to enter the Undergraduate Program, check your desired program of study)

- Chiropractic Sport Science
- Exercise and Sport Science
- Nutrition
- Sport Coaching
- Sport Injury Management

Program of Study (Check all that apply)

- Doctor of Chiropractic

Desired Entry Quarter and Year (Check one)

- Fall 20__ Winter 20__ Spring 20__ Summer 20__
- (Sept./Oct.) (Jan.) (March/April) (July)*

Citizenship Status

- U.S. Citizen by Birth
- Naturalized Citizen _____
Alien Registration #
- Alien, Permanent Resident
- Alien, Non-Resident

Place of birth _____
city state country

First Language _____ Second Language _____

Home State _____

Additional Information

Indicate any extracurricular activities or honors and awards you received (include high school, college, and professional).

Individuals who refer students receive recognition from Life University.

Referred by _____

Address _____

City _____ State _____ ZIP Code _____

Relationship to Applicant _____

Education Background

High School _____ Anticipated/Date of Graduation _____

_____ *city*

_____ *state*

If you are NOT A HIGH SCHOOL GRADUATE, did you take and pass the General Education Diploma (GED)?

If yes, GED received from _____
city *state* *date*

If you have attended an institution outside the U.S., please contact your admissions adviser for important evaluation information.

List ALL Colleges Attended	City/State	Graduated?	Dates	Degree
_____ <i>Most Recent College</i>	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	_____	_____
_____ <i>Previous College</i>	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	_____	_____
_____ <i>Previous College</i>	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	_____	_____
_____ <i>Previous College</i>	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	_____	_____
_____ <i>Previous College</i>	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	_____	_____

Failure to list all colleges previously attended, through omission or misrepresentation, will disqualify the applicant. Transcripts must be official and mailed directly from sending institution. Attach an additional sheet if necessary.

Are you currently enrolled in an institution above? yes no

If yes, which institution? _____

What will be your last term enrolled? _____

Check all that apply and include score if known.

Have you taken the SAT _____ ACT _____ TOEFL _____ GRE _____ MAT _____

Did you request that your scores be sent to Life University? yes no

Were you required to leave school or college or ever denied re-admission because of deficiencies in either conduct or scholarship? yes no

If yes, state briefly the circumstances. _____

Have you ever been convicted of a felony? yes no

If yes, please attach a formal, detailed explanation along with the court docket.

Have you ever talked with a representative from Life University? yes no

If yes, name _____

Have you visited Life University? yes no

If yes, when? _____

If no, when do you plan on visiting? _____

Payment Method

The application fee is \$50. *(Check one)*

VISA

Mastercard

AMEX

Personal Check

Money Order

credit card number

expiration date (month/year)

I hereby authorize Life University to apply a \$50 one-time, non-refundable charge to the credit card noted above.

signature of applicant

date

Applicants who are or will be applying to the Doctor of Chiropractic Program are subject to the Technical Standards Policy as presented in the Life University Catalog.

I hereby certify that I have read, and understand the Technical Standards Policy as listed in the Life University Catalog and am able to perform the essential and fundamental functions and tasks of the Doctor of Chiropractic Program with or without a reasonable accommodation.

signature of applicant

date



Life University does not discriminate in the application, retention or promotion of students based upon race, color, creed, sex, age, national origin or ethnic origin. Further, the University does not discriminate in its loan programs, scholarship programs, athletic programs, nor in any other school administered programs.

Life University
Office of New Student Development

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