

Ground Class Preference: *Campus*

Degree:

Shift:

Please fill out all sections to apply to American National University. For our privacy policy, visit an.edu/privacy-policy
Please see the American National University Catalog for term start dates and program availability at <http://www.an.edu/documents-library/about/Catalog.pdf>

Section 1 - Career Information

Program Name and Code:

Starting Term:

Section 2 - General Information

DOB:

SSN:

Former Last Name (if applicable)

Applicant Contact Information

Home Phone:

Work Phone:

Mobile Phone:

Email:

Emergency Contact

Phone #:

Additional Information

Country of Citizenship:

Marital Status:

Sex:

Ethnic Background (optional): American

Are you a Veteran?

Will you receive veterans benefits?

Might you qualify for tuition funding through an agency?

Name of Agency:

Section 3 - Reference Information

List three (3) references. First reference can be parent, guardian, or spouse. Second and third references must have different U.S. addresses from applicant and first reference. [Please review and make sure all references are completed in full.](#)

First Reference Name:

Address

City, State, Zip

Area Code/Phone

Second Reference Name:

Address

City, State, Zip

Area Code/Phone

Third Reference Name:

Address

City, State, Zip

Area Code/Phone

Section 4 - Employment

Current Employer

Position

Phone #:

Address

Name:	SSN:	DOB:
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Section 5 - High School Information

High School

City, State, Zip Code

Date of HS Graduation/GED Completion/State Equiv. Exam Completion

Ged Test Site (if applicable)

The following statement applies to your high school/high school equivalent education:

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Section 6 - Previous College Experience

If you have no previous college experience please leave this section blank.

College/University	City/State	Degree Earned	Dates Attended
			-

If you successfully completed courses at a previous college and you would like us to obtain your transcripts and evaluate for possible credit toward completion of your American National University program, please authorize American National University to order a copy of your transcripts in **Section 7**.

If you are interested in taking Advanced Placement tests and/or requesting Life Experience Credit for courses in your program, please see the Campus Director or Student Services personnel for more information.

Section 7 - Signature

Checking this box constitutes my express written consent to receive phone calls from American National University, at the phone number(s) I have provided, including a wireless number, regarding my education. I understand that these calls may be generated using an automated technology.

I have expressed my consent to receive text messages from American National University.*

*Please note that standard text message rates apply.

I authorize American National University to obtain a copy of high school and/or college/university transcript(s) from the appropriate custodian of such records.

I hereby apply for admission to American National University.

The information that I have submitted in this application is true, and I agree that any inaccuracy or false statement will entitle the college to deny or to rescind admission. If accepted, I agree to abide by the policies of the college.

Applicant's Signature

Date

Admissions Representative

Campus Code

FOR OFFICE USE ONLY

Application Fee Receipt #	Application Reviewed by