

Capital University

Instructions

Thank you for applying to Capital University. This application is for admission as a first-year (freshman) or transfer, degree-seeking student and is to be returned to the Undergraduate Admission Office. First-year and transfer student applications may be submitted online from Capital's Web site: www.capital.edu. Different applications must be completed for non-degree students, adult degree completion students and for international students (other than U.S. citizens). These applications can be requested from the appropriate office.

Admission Office Components

- **Application Fee: \$25**
(Apply free online at www.capital.edu.)
- **Counselor Information (for first-year students):**
Complete your section on the top of this form and give it to your high school counselor with a stamped, addressed envelope. Your counselor will send the completed form to Capital.
- **Transcripts:** Request that your *official* transcripts (both high school and all college and university) be sent to the Admission Office.
- **Testing Data:** Capital University requires either the ACT or the SAT be taken as part of the admission process for first-year students. Capital's code number for the **ACT is 3242** and for the **SAT is 1099**.
- Conservatory of Music applicants are required to audition for acceptance. Visit www.capital.edu/conservatory-admission. Review the audition requirement, complete the application and select a date for your audition.

Financial Aid

- Complete the Free Application for Federal Student Aid (FAFSA) online at www.fafsa.ed.gov after you do your taxes. Designate Capital University as one of the colleges to receive your data. **The Title IV Institution Code for Capital is 003023.**
- Your application for financial assistance will not influence the admission decision.

All correspondence should be addressed to:

CAPITAL UNIVERSITY
ADMISSION OFFICE
1 College and Main
Columbus, OH 43209-2394

admission@capital.edu
www.capital.edu
614-236-6101
Toll free: 1-866-544-6175
Fax: (614) 236-7947

Undergraduate Admission Application for First-Year (Freshman) and Transfer Students

Capital University

1 COLLEGE AND MAIN, COLUMBUS, OHIO 43209-2394

1-866-544-6175 • (614) 236-6101 • Fax: (614) 236-7947
admission@capital.edu • www.capital.edu

Personal Information

Please type or print.

Mr. ___ Ms. ___ Mrs. ___ _____
Last First Middle (Complete) Preferred Name (Nickname)

Permanent Address: _____
Number and Street City State ZIP (List county)

Mailing Address: _____
Number and Street City State ZIP (List county)

If mailing address is different than permanent address, give inclusive dates: from _____ to _____

Telephone: Home () _____ Cell () _____ E-mail Address: _____

Emergency Contact _____ Relationship to you _____ Telephone _____
Last First

Marital Status: Single Divorced Separated Married Widowed Birthplace (City and State/Country): _____

Social Security Number*: _____/_____/_____ Are you a U.S. citizen? Yes No
If no, are you a permanent resident? Yes No
Birth Date* (optional): _____ If yes, alien registration # _____

*Through our financial aid process, your Social Security Number and birth date will be necessary for verification of your FAFSA information.

Are you a veteran? Yes No Are you planning to use your (or family members) veteran benefits to pay for your tuition? Yes No

Are you Hispanic or Latino? Yes No

Select One or More Races: _____ American Indian or Alaska Native _____ Asian _____ Black or African American
_____ Native Hawaiian or Other Pacific Islander _____ White

Religious Preference (optional):
 Lutheran-ELCA Lutheran-LCMS Lutheran-Other Baptist Hinduism No Church Affiliation Presbyterian
If Lutheran, name of church _____ Buddhism Islam Other Protestant Religion Not Reported
City/State of church _____ Episcopal Jewish Other Religion Roman Catholic
 Greek Orthodox Methodist Mormonism United Church of Christ

Enrollment Plans

Application for enrollment in 20_____ Fall (August) Spring (January) Summer

I am applying as a: Traditional First-Year Freshman Transfer Student

I would like to major in: _____ I am unsure of my major
Refer to list of majors.

If music major, list instrument or voice: _____

I am applying for: Full-time Part-time University Residence: On-campus resident Commuter living with parents*
* You must meet off-campus housing requirements.

Have you submitted or will you submit the Free Application for Federal Student Aid (FAFSA)? Yes No
Have you ever applied for admission or been enrolled at Capital University? Yes No If yes, when? _____

Activities

List ALL of your extracurricular activities and honors (examples: music, athletics, student government, community service, etc.). If additional space is needed, please use a separate sheet of paper.

Activity	Years of participation	Position held or honors won
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Family Information

This information is for the general use of Capital University.

Father/Guardian: Mr. Dr. Rev. _____
Last First Middle

Address (if different from your address): _____
Number and Street City State ZIP

Father's/Guardian's Occupation: _____
Position/Title Employer/City and State

Mother/Guardian: Mrs. Ms. Dr. Rev. _____
Last First Middle

Address (if different from your address): _____
Number and Street City State ZIP

Mother's/Guardian's Occupation: _____
Position/Title Employer/City and State

Parents are: Married Divorced Single Separated Widowed

E-mail Address of Custodial Parent: _____ Relationship to You: _____

If not living with both parents, with whom do you make your permanent home? _____ Relationship to You: _____

If you are married, spouse's name: _____
Last First Middle

Spouse's Occupation: _____
Position/Title Employer/City and State

List relatives who are attending or have graduated from Capital University (name [include maiden name, if applicable], graduation year, relationship to you): _____

Educational Information

List all the high schools and colleges/universities attended, beginning with the most recent, and include date(s) of graduation or anticipated date of graduation. For each school, please give the official College Examination Code (CEEB code). If additional space is needed, please use a separate sheet of paper.

School: _____ From: _____ - _____ to _____ - _____
Month Year Month Year

City: _____ State: _____ CEEB Code: _____ Telephone: _____ Date of Graduation: _____

School: _____ From: _____ - _____ to _____ - _____
Month Year Month Year

City: _____ State: _____ CEEB Code: _____ Telephone: _____ Date of Graduation: _____

School: _____ From: _____ - _____ to _____ - _____
Month Year Month Year

City: _____ State: _____ CEEB Code: _____ Telephone: _____ Date of Graduation: _____

Have you ever been suspended or expelled from any high school or college/university? Yes No (If yes, please attach a statement of explanation.)

Have you ever been convicted or pleaded guilty to a felony? Yes No (If yes, please attach a statement of explanation.)

Have you been found responsible for any academic or other misconduct at any high school or college/university? Yes No

(If yes, please attach a statement of explanation.)

Personal Statement

If there has been a gap in your education or you would like to share additional information with the Admission Committee, please explain on a separate sheet of paper. Any additional information that you feel would be helpful in the review of your application would be welcomed by the university.

Certification – Do you certify the following?

I understand that once my application has been submitted it may NOT be altered in any way.

Capital University is committed to challenging students and creating a personalized learning environment that is free from prohibited discrimination and harassment. The University prohibits discrimination on the basis of race, color, religion, national and ethnic origin, sexual orientation, class, sex and gender, age, disability, veteran status, or any other characteristic protected by law, and admits qualified students to all the rights, privileges, programs, and activities generally accorded or made available to students.

I certify that all of the information submitted in the application is my own work, true and correct to the best of my knowledge. I authorize all schools attended to release all requested records and authorize review of my application. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation or expulsion, should the information I certified be false. I understand that an offer of admission is conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based. In addition, I acknowledge that the University reserves the right to withdraw offers of admission if applicants fail to satisfy all requirements; if it is determined that admission was obtained through the use of falsified, altered, or embellished information; if there is a substantial drop off in academic performance; or if there is a change in disciplinary status after the time of application including engaging in behavior that is deemed incompatible with positive contributions to the campus environment (such as safety concerns, violence, threats, etc.). Finally, I understand the University may revoke my admission if it determines the I have engaged in the conduct that it deems unbecoming of an applicant or student, including conduct of a criminal nature, even if conduct does not result in a conviction.

Signature: _____ Date: _____

First-Year Applicants Only

COUNSELOR INFORMATION

Complete this section and give this form and a stamped envelope addressed to **Capital University, Admission Office, 1 College and Main, Columbus, OH 43209-2394** to your guidance counselor. Please type or print.

Date: _____ Name: _____
Last First Middle (complete)

Address: _____
Street City State ZIP

Telephone: Home () _____ Cell () _____

ACT was taken on: _____ Date (month, day, year) SAT was taken on: _____ Date (month, day, year) ACT or SAT is scheduled for: _____ Date (month, day, year)

List courses to be completed in current year (if more than two terms, use separate sheet). Your courses and performances this year are considered in our final admission decision.

If you plan to have any college-level transfer credit, including PSEOP (State of Ohio Post-Secondary Enrollment Options Program) credit, please list colleges/universities attended and courses.

College/University	Course Department and Title
_____	_____
_____	_____

Please have your official high school transcripts sent to the Admission Office for an official credit evaluation.

I authorize the counselor to release all information regarding my academic and disciplinary records to Capital University.

Signature _____ Date _____

High School Counselor Section

Please attach an official transcript and include, if available, a school profile and transcript legend. We appreciate your assistance.

This student has a _____ G.P.A. on a _____ scale and ranks _____ in a class of _____ students. (If a precise rank is available, please indicate rank to the nearest tenth from the top.) The G.P.A. and rank (are, are not) weighted and cover a period from _____ to _____.
circle one (month/year) (month/year)

Are ACT and SAT scores reflected on the high school transcript? Yes No

Of this student's graduation class, _____ percent plan to attend a four-year college or university.

Has this student been suspended or expelled from high school? Yes No

This student is exempt from passing or has passed all sections of the Ohio Graduation Test (OGT) and is eligible to receive a high school diploma. Yes No

Signature _____ Date _____

Name (print): _____
First Middle Last

Position: _____ School: _____

School Address: _____
Street City State ZIP

Office Telephone: () _____ School CEEB/ACT Code: _____ Counselor E-mail Address: _____

Please check here if it would be advisable for Capital to call for further information.

Confidentiality

We value your comments highly and ask that you complete this form knowing that it will be retained in the student's file should he or she matriculate at Capital. You may want to make a copy for your records. In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students have access to their permanent files. We do not provide access to admissions records to applicants who are rejected or who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation.

Capital University admits qualified students regardless of race, color, religion, gender, age, disability or national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the university.

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admission@capital.edu • www.capital.edu • 614-236-6101 • 1-866-544-6175 • Fax: 614-236-7947

DEPARTMENTS AND MAJORS

ART

Art Therapy
Studio Art**

BIOLOGICAL AND ENVIRONMENTAL SCIENCES

Biology*
Environmental Science

BUSINESS

Accounting
Business Management
Financial Economics
Marketing

CHEMISTRY

Biochemistry
Chemistry*
Chemistry* (A.C.S. Certified)
Chemical Engineering (Dual Degree)

COMMUNICATION

Communication Studies*
Electronic Media and Film
Organizational Communication
Public Relations
Theatre Studies

CONSERVATORY OF MUSIC

BACHELOR OF MUSIC

Music Education**

Dual
Instrumental
Vocal

Keyboard Pedagogy

Church
Organ
Piano

Music Industry

Music Technology

Performance

Jazz Studies
Composition
Instrumental

Organ
Piano

Voice

Voice (Opera/Music Theatre Emphasis)

BACHELOR OF ARTS

Music
Professional Studies (Music Technology Emphasis)

EDUCATION

Early Childhood Education (Pre-K through Grade 3)
Middle Childhood Education (Grades 4-9)
Adolescent to Young Adult Education (Grades 7-12)
Intervention Education (Grades K-12)
Multi-Age Education (K through Grade 12)

ENGLISH

Creative Writing*
Literature*
Professional Writing/Journalism*

HEALTH AND SPORT SCIENCES

Athletic Training
Exercise Science
Health and Fitness Management

HISTORY

History*

MATHEMATICS AND COMPUTER SCIENCE

Computer Science
Computer Science – Engineering (Dual Degree)
Mathematics*
Mathematics – Engineering (Dual Degree)

NURSING

Nursing (Traditional BSN)

POLITICAL SCIENCE AND ECONOMICS

Economics
Economics/Political Science
International Studies
Political Science*
Public Administration

PROFESSIONAL STUDIES

Interdisciplinary Studies

PSYCHOLOGY

Psychology

RELIGION AND PHILOSOPHY

Philosophy
Religion
Worship Ministries
Youth Ministry and Christian Education

SOCIAL WORK

Social Work

SOCIOLOGY AND CRIMINOLOGY

Criminology
Sociology

WORLD LANGUAGES AND CULTURES

French
Spanish

PRE-PROFESSIONAL

Pre-Dentistry
Pre-Law***
Pre-Medicine
Pre-Occupational Therapy
Pre-Optometry
Pre-Pharmacy
Pre-Physical Therapy
Pre-Physician Assistant
Pre-Podiatry
Pre-Public Health
Pre-Seminary
Pre-Veterinary Medicine

Capital
University

Ask. Think. Lead.

ADMISSION OFFICE

1 COLLEGE AND MAIN
COLUMBUS, OH 43209-2394

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www.capital.edu

*Major also offered with Adolescent to Young Adult (Grades 7-12) education licensure.

** Major also offered with Multi-Age Education (K through Grade 12) education licensure.

***In addition to the Pre-Law Specialization, we also offer the 3+3 Bachelor of Arts/Juris Doctor Program which is an accelerated joint degree program to set you on the fast track to a career in law. Offered in conjunction with Capital's own law school.