



America Evangelical University

Application for Admission

1818 S. Western Ave. #409 Los Angeles, CA 90006

❖ Applicant's Personal Information

1. **Name:** _____
Last First Middle
2. **Address:** _____
Street Unit#

City State Zip
3. **Phone:** _____ 4. **Email:** _____
5. **Date of Birth:** _____ 6. **Place of Birth:** _____
(dd/mm/yy) (country)
7. **Social Security Number** (optional): _____
8. **Driver's License Number** (optional): _____
9. **Gender:** M() F() 10. **Marital Status:** Single() Married()
11. **Status:**
- a) Are you a citizen of the U.S.? Yes() No()
- b) If no, what is your country of citizenship? _____
- c) Visa Status: _____ d) Alien Registration Number: _____
(if available)

12. Emergency Contact:

Name	Phone Number	Relationship

13. Family Information:

Name	Age	Relationship

14. Academic Background:

Name of School (most recent)	Location	Duration (mm/yy-mm/yy)	Degree/Diploma

15. Work/Ministry Experiences:

- Name of Company or Church:
Duration: _____ Position: _____
- Name of Company or Church:
Duration: _____ Position: _____
- Name of Company or Church:
Duration: _____ Position: _____

- ❖ **Degree Program to Start:** Winter 20__ Spring 20__
Summer 20__ Fall 20__
- ❖ **Degree Program to Study at AEU:** _____ **Major:** _____

❖ **AGREEMENT FOR ALL APPLICANTS**

A vision of America Evangelical University is to educate men and women to be effective and powerful leader to serve the church and change the world through Christian higher education.

I hereby certify that all information I provided are correct and complete to the best of my knowledge. And I also agree to abide by all policies and regulations of America Evangelical University.

SIGNATURE OF APPLICANT: _____ DATE: ___/___/___

