



Fall 20\_\_\_\_

Winterlude 20\_\_\_\_

Spring 20\_\_\_\_

Summer School 20\_\_\_\_

**Personal Information**

Name: \_\_\_\_\_

*First*

*Middle*

*Last*

*(Maiden)*

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

U.S. Citizen:  Yes  No

If No, Immigration Status: \_\_\_\_\_

**Previous Northland Information**

Dates Attended Northland: \_\_\_\_\_

Program of Study last pursuing: \_\_\_\_\_

Do you wish to continue in this program or change? \_\_\_\_\_

If changing, please list what program: \_\_\_\_\_

**Marital Information**

Single  Married  Divorced\*

Engaged\*  Separated\*  Remarried\*

*If any item marked with an asterisk is checked, please explain on an additional sheet of paper.*

**If Married:**

Spouse's Name \_\_\_\_\_

Number of Children: \_\_\_\_\_ Names and Ages of Children:

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Educational Information

Since you were last enrolled at Northland International University, have you participated in an academic program at another college or university?  Yes  No

If yes, please list the institution and program below.

<i>Institution</i>	<i>Program</i>	<i>Dates Attended</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Transcripts of the work completed will need to be supplied to the Registrar's Office.*

*A transfer reference form must be completed by the institution's personnel.*

## Church Information

What church do you regularly attend? \_\_\_\_\_

Address of church: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_

Pastor: \_\_\_\_\_

## Statement of Intent

*In signing this application for admission to Northland International University, I certify my willingness, if accepted, to cooperate with the purpose and standards of Northland, abide by all of the policies of the college, subscribe to its doctrines, and cooperate fully in advancing the cause of Christ and the testimony of Northland. Any falsification on any part of this application can result in cancellation of admission and/or dismissal from Northland.*

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Signature of Applicant (*if applicant is under 21*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Mail to:  
**OFFICE OF ADMISSIONS**  
**Northland International University**  
W10085 Pike Plains Road  
Dunbar, WI 54119

or fax to (715) 324-6133  
or call (888) 4-NORTHLAND