



## E D U C A T I O N A L   H I S T O R Y

**If you have attended another post secondary school, college or university: give the name and address of the institution(s) you attended and dates of attendance. Include any attendance at the University of the Incarnate Word (main campus). Failure to disclose information about another institution is grounds for dismissal.**

(Most Recent First) College Name & Location	From Month / Year	To Month / Year	# of Hours Attempted	# of Hours Passed

## E M P L O Y M E N T   H I S T O R Y

(Most Recent First)

Dates	Employer	Business Phone	Position

I hereby certify that I have answered all the questions on this application and to the best of my ability.

**Please request official transcripts from all institutions you have previously attended and bring them to your advising appointment or have them mailed to the ADCaP office address on the front of this form. Applicants are welcome to submit letters of recommendation. Applicants that wish to address circumstances regarding their application are encouraged to submit a letter of explanation.**

By submitting this application, I certify that I am seeking to enroll at Incarnate Word and that the information provided on the application is true and accurate to the best of my knowledge. I agree that if accepted for admission, I shall comply with all the rules and regulations of the University which may be in effect or which shall be put into effect while I am a student.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**The University of the Incarnate Word pursues a policy of non-discrimination in compliance with Title IX of the Education Amendments of 1972. Students are admitted without any discrimination regarding sex, race, creed, age, national or ethnic origin, or physical handicap.**