APPLICATION FOR READMISSION

(For the online application, go to www.grace.edu. There is no application fee if you apply online.)
application for

☒ Fall  ☑ Spring  ☑ Summer  ☑ Autumn  ☑ Fall  ☐ Spring  ☐ Summer  ☐ Autumn

☒ College (Undergraduate)  ☒ College (Graduate)  ☐ Seminary

☒ Part-time  ☑ Full-time

personal information

Name ________________________________
Maiden Name ________________________________
Has your name changed since you last attended Grace?  ☐ Yes  ☐ No  ☐ If yes, give previous name 

Current Address ________________________________
City ______________________________________ State __________ Zip __________________________
Home Phone ( _______ ) ______________________ Work Phone ( _______ ) ______________________
Email ______________________________________
Permanent Address ________________________________
City ______________________________________ State __________ Zip __________________________
Permanent Phone ( _______ ) ______________________
Social Security ________________________________ Birth Date __________________________

Marital Status  ☐ Single  ☐ Married  ☐ Divorced  ☐ Widowed  ☐ Separated  ☒ Gender  ☐ Male  ☒ Female
Have you ever been subject to court probation or disciplinary action?  ☐ No  ☐ Yes
If yes, please provide the date(s) and explanation. ____________________________________________________________

educational history

What year did you last apply to Grace? ________________________________
What year and semester did you last attend Grace? ________________________________
What schools, if any, have you attended since you last applied to or attended Grace? ________________________________

Were you ever dismissed from Grace for any reasons?  ☐ Yes  ☐ No
If so, why? ______________________________________________________________

current church affiliation

Church Name ________________________________
Address ______________________________________
Denomination ________________________________ Pastor’s Name ________________________________

parents (for dependent students only)

Father’s full name or legal guardian ________________________________
Address ______________________________________
Place of employment ______________________________________
Home phone ( _______ ) ______________________ Work phone ( _______ ) ______________________
Mother’s full name or legal guardian______________________________________________________________

Address____________________________________________________________________________________

Place of employment_______________________________________________________________________________________________

Home phone (_______) ______________________________ Work phone (_______) ______________________________

What do you plan to major in? (college undergraduate students only)_______________________________________________________

GOAL re-admits

❍ GOAL online

❍ GOAL residential

What degree are you reapplying for? (college graduate students only)

❍ Master of Arts in Clinical Mental Health Counseling (on campus)

❍ Master of Arts in Clinical Mental Health Counseling (online)

❍ Master of Science in Higher Education (online)

❍ Master of Science in Nonprofit Management (online)

❍ Master of Business Administration (online)

❍ Master of Education (online)

❍ Master of Arts in Ministry Studies (online)

❍ Master of Science in Athletic Administration (online)

❍ Master of Science in Medical Device Quality Management (on campus)

❍ Master of Science in Orthopaedic Regulatory and Clinical Affairs (on campus)

What degree are you reapplying for? (seminary students only)

❍ Certificate in Biblical Studies

❍ Master of Divinity

❍ Pastoral Counseling Studies

❍ Intercultural Studies

❍ Pastoral Studies

❍ Chaplaincy Studies

❍ Exegetical Studies

❍ Diploma in Theology

❍ Master of Arts in Local Church Ministry

❍ Master of Arts in Intercultural Studies

❍ Doctor of Ministry

❍ Doctor of Intercultural Studies

housing information (traditional college undergraduate students only)

All unmarried students under 22 years of age and registered for less than twelve hours and not living with parents or relatives must reside in a college residence.

I plan to:  ❍ Live on campus  ❍ Live at home (with relatives)  ❍ Commute

lifestyle commitment

We ask that you sign the space provided, acknowledging that you are aware of Grace’s established and printed standards for your program and you will abide by them.

__________________________  __________________________
Signature                                      Date
Grace College and Seminary is a private, not-for-profit, faith-based exempt organization as described in Section 501 (c) (3) of the Internal Revenue Code. In compliance with applicable federal and state laws, Grace College and Seminary does not discriminate on the basis of race, color, national origin, age, sex, or disability in its administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs and activities, or in employment.

The following person has been designated to handle inquiries regarding the Notice of Nondiscrimination:

Carrie Yocum, Title IX Coordinator and VP of Administration and Compliance
Grace College and Seminary
200 Seminary Drive
Winona Lake, IN 46590
yocumca@grace.edu
574-372-5100 x6491

Inquiries may also be addressed to the U.S. Department of Education’s Office for Civil Rights at 400 Maryland Avenue, SW, Washington, DC 20202-1100.