



1101 E. 78<sup>TH</sup> STREET SUITE 100  
BLOOMINGTON, MN 55420

# ADMISSION APPLICATION

**PERSONAL INFORMATION** *\*\*See back for admissions criteria.*

Name (Last, First, MI)		Social Security #:	Driver's License #:	Date of Application:
Mailing Address (If P.O. Box address - must provide house address):			City:	
State:	Zip Code:	County of Residence:	Please indicate your status: <input type="radio"/> U.S. Citizen <input type="radio"/> Permanent Resident <input type="radio"/> Neither	
Home phone number:		Cell phone number:	Work phone number:	
E-mail Address:			Do you consider yourself Hispanic/Latino?: <input type="radio"/> Yes <input type="radio"/> No	
Select one or more of the following racial categories to describe yourself: <input type="radio"/> American Indian or Alaskan Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Pacific Islander <input type="radio"/> White <input type="radio"/> Other				
Marital Status: <input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Divorced		Sex: <input type="radio"/> Male <input type="radio"/> Female	Birth Date:	Are you a Veteran? <input type="radio"/> Yes <input type="radio"/> No
Name of High School:		Location:	Date of Graduation:	If GED, year received:
# of Children:	Ages of Children:	General Health:	List medical problems, if any:	
Emergency Contact:			Relationship:	Emergency Phone:
Spouse's Name:		Spouse's Employer:		Spouse's Phone Number:
Parent's Name(s):				Parent's Phone Number:
Parent's Address:		City:	State:	Zip:

**POST HIGH SCHOOL EDUCATION** (List all Colleges, Universities, Technical Schools, etc. you have attended)

NAME OF SCHOOL	LOCATION	DATES ATTENDED	GPA	DEGREE	MAJOR	MINOR

DO YOU WISH TO TRANSFER CREDITS? \_\_\_\_\_

DO YOU WANT TO APPLY FOR FINANCIAL AID? \_\_\_\_\_

**PROGRAM SELECTION:**

SAT or ACT score if applicable \_\_\_\_\_

NAME OF PROGRAM: (please indicate choice as listed in the catalog)		
<b>DEGREE OR CERTIFICATE:</b> <input type="radio"/> BS Degree <input type="radio"/> AAS Degree <input type="radio"/> Certificate	<b>ENROLLMENT STATUS:</b> <input type="radio"/> Full-time <input type="radio"/> ¾-time <input type="radio"/> Half-time	<b>START DATE:</b> _____, 20____

**APPLICATION FEE AND ACCEPTANCE OF TERMS:**

A non-refundable application fee must accompany this completed application. Please have transcripts from any schools listed on this application form forwarded to us as soon as possible. Academy College reserves the right to retain samples of the student's art work for the school's permanent collection, exhibition, publication, or broadcast. I grant Academy College permission to provide to a third party or parties any or all of the information which is contained in the school's student or graduate files and records of myself, and information which is usual and normal in the conduct of business of a school.

**Application Fee: \$40.00**   I have enclosed: \$\_\_\_\_\_ for my application fee.   **School Catalog Received:** Initials: \_\_\_\_\_

My signature below indicates that I understand that the school catalog is the complete statement of all terms and conditions of my contract with Academy College. This agreement becomes a legally binding instrument upon written acceptance of the student by Academy College unless canceled pursuant to the Refund Policy as stated in the school catalog.

<b>Signature of student:</b> _____	under 18? <input type="radio"/> yes <input type="radio"/> no	<b>Date:</b> _____
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If student is under 18 years of age, signature of parent or guardian | Relationship

_____	<b>Date:</b> _____
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## **ADMISSIONS CRITERIA:**

### **Academy College Orientation Exam:**

If you choose this criteria, the Orientation Exam will be administered by an Admissions Representative at Academy College.

#### **Student Scores**

- Student scoring 60 percent or above are allowed admission into Academy College
- Students scoring 40 to 59 percent on the orientation exam will be placed on Conditional Enrollment. They **MUST** meet the Director of Education (DOE) to discuss and sign a conditional enrollment form.
- Students scoring below 39 percent cannot enroll into the school.

<b>Score</b>	<b>Status</b>
60- 99 percentile	Regular enrollment
40-59 percentile	Conditional enrollment
0-39 percentile	May not be enrolled

or

#### **GPA:**

A score of 2.0 or higher from high school or a post secondary institution in which a degree or certificate was earned within 10 years of the application date for enrollment. If you choose this criteria, please attach a copy of your high school transcript.

or

#### **SAT:**

A score of 1000 or higher taken within 10 years of the application date for enrollment. If you choose this criteria, please attach a copy of your SAT score report.

or

#### **ACT:**

A score of 20 or higher taken within 10 years of the application date for enrollment. If you choose this criteria, please attach a copy of your ACT score report.

### **APPROVALS**

Academy College is approved by the Minnesota State Approving Agency for Veterans Educational benefits. It is also approved by the State of Minnesota for education under the Vocational Rehabilitation Education program and is approved by the FAA under FAR Part 141.

### **ACCREDITATION**

Academy College is accredited by the Accrediting Council for Independent Colleges and Schools to award Bachelor of Science Degrees, Associate Degrees, and Certificates. The Accrediting Council for Independent Colleges and Schools is listed as a nationally recognized accrediting agency by the U.S. Department of Education and is recognized by the Council for Higher Education Accreditation. The College of Business & Finance, College of Digital Arts & Design, College of Medical & Health Sciences, College of Aviation, and College of Computer Technology are divisions of Academy College.

The Academy College Medical Assistant Certificate Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). CAAHEP accredits programs upon the recommendation of the Medical Assisting Education Review Board (MAERB). The Commission on Accreditation of Allied Health Education Programs (CAAHEP) and the American Association of Medical Assistants and American Medical Association cooperate to establish, maintain and promote appropriate standards of quality for educational programs in medical assisting throughout the country. CAAHEP's accreditation of degree-granting institutions is recognized by the Council for Higher Education Accreditation.

### **REGISTRATION**

Academy College is registered as a private institution with the Minnesota Office of Higher Education pursuant to Minnesota Statutes, sections 136.A61 to 136A.71. Registration is not an endorsement of the institution. Credits earned at the institution may not transfer to all other institutions.

### **MEMBERS**

Academy College is a member of Minnesota Career College Association (MCCA) and the Association of Private Sector Colleges & Universities (APSCU).