



Application for Admission

OIDA CHRISTIAN UNIVERSITY DOES NOT DISCRIMINATE IN ADMISSIONS OR ACCESS TO, OR TREATMENT IN ITS PROGRAMS AND ACTIVITIES ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, GENDER, DISABILITY, AGE OR VETERAN STATUS

Part A: Name and Address Information (Application must be printed in ink):

1. Social Security Number: _____ - _____ - _____ 2. Date of Birth (Required): _____
(Month/Day/Year)

3. Full, Legal Name: _____
(Last/Family) (First) (Middle Initial) (Suffix)

4. Other Names Which May Appear on Academic Records: _____

5. Gender: Male _____ Female _____

6. Place of Birth: _____
(City) (State) (Country)

7. Student's Current
Physical Address: _____ Apt. #: _____ City: _____
(Street Number & Name - Cannot be a P.O. Box number)

State: _____ Zip: _____ County: _____ Country: _____

How long have you lived at this address? Years _____ Months _____

Please be sure to provide a cell phone number if you have one. You may update your phone numbers in your Web Advisor student account as needed.

Cell Phone: (_____) _____ Residence Phone: (_____) _____ Work Phone: (_____) _____

8. Permanent Mailing Address: _____

Apt # _____ City: _____ State: _____ Zip: _____ Country: _____

9. Is English your native language? Yes No If no, what is your native language? _____

10. Primary E-mail Address: _____

Secondary E-mail Address: _____

11. Emergency Contact

Name: _____

(Please be sure to provide a cell phone number for your Emergency Contact if they have one.)

Cell Phone: _____ Other: _____

12. Where do you plan to take classes?

Texas Central (Killeen) Distance Learning/Online Other Site: _____

13. High School Attended:

(Complete Name of High School) (City) (State)

14. Educational Goal (choose one):

AA Degree in Theology AA Degree in Counseling BA Degree in Theology BA Degree in Counseling

MA Degree in Theology MA Degree in Counseling

15. Are you a member of a church? YES NO 16. Do you attend church on a regular basis? YES NO

17. Church Denomination: _____ Pastor's Name: _____

18. Name of the Church: _____ Phone # _____

I understand that students must provide official scores to the college (scores on high school or college transcripts are considered official).

If my application is accepted, I agree to abide by the policies, rule and regulations of Oida Christian University. I certify that the information on this application is complete and correct and I understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment and/or appropriate disciplinary action. I authorize the college to verify the information I have provided. I agree to notify the proper officials of the institution of any changes in the information provided.

Signature: _____ Date: _____