



GRACE OPPORTUNITIES FOR ADULT LEARNERS (GOAL) ON-CAMPUS APPLICATION

For the online application, go to www.grace.edu/applynow. No application fee if you apply online.

Grace College
Graduate & Adult Enrollment
200 Seminary Drive
Winona Lake, Indiana 46590
Telephone: 877.607.0012

GOAL application for on-campus

(Please type or print clearly)

Name: Mr. / Miss / Mrs. _____

Address: _____

City _____ State _____ Zip _____

Telephone: Home _____ Other _____ Cell _____

Birth Date _____ Social Security _____ E-mail _____

Ethnic Background:

- Asian
- American Indian
- African American
- Latino
- White Non-Latino

Are you a veteran of the U.S. Armed Forces or a dependent of a U.S. Armed Forces veteran? Yes No

If so, would you like to check on your eligibility for veteran's benefits? Yes No

Previous Education:

College:

Institution's Name _____

City _____ State _____

Hours Complete _____

Degree (if applicable)

College:

Institution's Name _____

City _____ State _____

Hours Complete _____

Degree (if applicable)

Have you ever applied to or attended Grace? Yes No

Semester you plan to enter program? Fall Spring Year: _____

Degree of Interest B.S. Management B.S. Medical Device Quality Management

What factors influenced your decision to apply for the GOAL program? _____

Please complete the short essay on the next page.

ESSAY

Please describe yourself as a student, a professional, and a citizen.

By signing and submitting this application you are indicating to abide by the following GOAL Student Pledge while on campus or engaged in Grace activities.

The GOAL Student Pledge

I agree to show respect for the faith commitment that Grace practices and agree to abide by certain of the institution's community guidelines (avoidance of disrespecting others, sexual misconduct, illegal drugs, gambling, coarse or obscene language, tobacco, alcoholic beverages, and such conduct) while on campus or engaged in Grace activities. I certify that all my answers on this application are complete and true to the best of my knowledge. Furthermore, I understand that falsifying any part of this application could result in a failure to be admitted or registered.

X _____ Date _____



notice of non-discrimination

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.

Please mail this completed form to:

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