



Office of Admissions
2020 E. Maple Street
North Canton, OH 44720

**APPLICATION FOR ADMISSION
GRADUATE**

NON-DEGREE STUDENT

- TRANSIENT NON-DEGREE
 LICENSURE/CERTIFICATION

PLEASE TYPE OR PRINT

FOR OFFICE USE ONLY

- Accepted _____ Date
 Not Accepted

FULL NAME (LAST, Mr. Miss, Ms., Mrs)		FIRST	MIDDLE/MAIDEN	BIRTH DATE
SOCIAL SECURITY NO			TELEPHONE	
STREET ADDRESS			CITY	STATE ZIP CODE
COUNTY	E-MAIL ADDRESS			
COUNTRY OF CITIZENSHIP	RACE (Optional)	RELIGIOUS PREFERENCE (Optional)	MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Single	
SEMESTER TO ENTER <input type="checkbox"/> Fall <input type="checkbox"/> Summer <input type="checkbox"/> Spring		YEAR TO ENTER	STATUS <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	

EDUCATION STUDENTS: Seeking License/Certification Renewal Other Auditing

Education Certification Held (if applicable):

TYPE (PROV./PROF./PERM.)	GRADE (ELEM./SEC./PRIN./ETC.)	STATE ISSUING CERTIFICATE	EFFECTIVE DATE

COUNSELING STUDENTS: Seeking License/Certification Renewal Auditing

Mental Health Counseling — Applicants are responsible for contacting the Ohio Counseling and Social Worker board which identifies the courses required, based on deficiencies.

School Counseling — Required courses are determined according to Ohio Department of Education guidelines.

Current Licensure/Certification:

TYPE	STATE ISSUING CERTIFICATE	RENEWAL DATE

PREVIOUS STUDY List ALL colleges and universities attended (graduate and undergraduate), including Walsh University even if no degree was awarded.

COLLEGE OR UNIVERSITY	LOCATION	DEGREE	MAJOR	DATE AWARDED

EMPLOYER	POSITION	PHONE
WORK ADDRESS (STREET ADDRESS)	CITY	STATE ZIP CODE

APPLICATION PROCESS FOR LICENSORS OR CERTIFICATION

1. Submit completed application form accompanied by a non-refundable application fee of \$25.
2. Official transcripts of undergraduate and other graduate study should be sent directly from the applicant's college to the Walsh University Office of Admissions.
3. Notarized affidavit of Good Moral Character.

SIGNATURE	DATE
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