



# Benedictine University

## UNDERGRADUATE

### Application For Admission

5700 College Road, Lisle, Illinois 60532

Enrollment Center Phone: (630) 829-6300

Outside Illinois: (888) 829-6363

FAX: (630) 829-6301

Email: [admissions@ben.edu](mailto:admissions@ben.edu)

Web Address: [ben.edu](http://ben.edu)

Apply online @ [ben.edu/apply](http://ben.edu/apply)

**Contact us for a campus visit.**

# APPLICATION INFORMATION AND CHECKLIST

## Applicants please note the following:

- Send all materials to: Enrollment Center, Benedictine University, 5700 College Road, Lisle, IL 60532.
- A personal interview with an admissions counselor is generally advisable and occasionally required.
- OFFICIAL** transcripts bearing the signature of the registrar and the institutional seal must be issued either by direct mail or electronically from the institution to Benedictine University's Enrollment Center. Transcripts must arrive in either a sealed envelope or be submitted electronically to e-transcripts@ben.edu (Freshman applicants) or e-transcripts@ben.edu (Transfer applicants) to be considered official.
- You will be considered for admission as soon as all of your credentials are received.
- You may be required to submit a personal statement prior to an admission decision. Your admissions counselor will provide more information.
- All documents submitted become property of Benedictine University and will not be released to the student or any third party.
- Students with a documented physical or mental disability may be eligible for special accommodations through the Americans with Disabilities Act. Please contact the Academic and Career Enhancement Center for more information.

## Applicants please review checklist:

- Application for admission.
  - OFFICIAL AND SEALED** transcripts from ALL colleges in which you previously enrolled.
  - OFFICIAL** high school transcripts for **FRESHMAN** applicants only.\*
  - OFFICIAL** copy of ACT, SAT or TOEFL Test Scores\* (if on official transcript from high school, scores are considered official).
  - Recommendation form completed by your high school counselor for **FRESHMAN** applicants only (recommended and may be required).
  - Foreign credit must be evaluated by Educational Credential Evaluators (ECE) at [ece.org](http://ece.org), Educational Perspectives at [edperspective.org](http://edperspective.org) or World Education Services (WES) at [wes.org](http://wes.org). Please contact us directly to see what documents need to be prepared by one of these firms.
- \*High school transcripts and (ACT or SAT) test scores required for transfer students with less than 12 transferrable semester hours.

## GENERAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE NAME
OTHER NAMES	MAIDEN NAME (IF ANY)	
STREET ADDRESS	COUNTY	
CITY	STATE	ZIP
TELEPHONE	EMAIL ADDRESS	
CELL PHONE	MAY WE TEXT YOU AT THIS NUMBER?	
	<input type="checkbox"/> NO <input type="checkbox"/> YES	
SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YY)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ETHNICITY	RELIGION	

Are you a first generation college student?       No     Yes  
 FIRST GENERATION STUDENTS ARE THOSE STUDENTS WHOSE PARENTS OR SIBLINGS HAVE NOT COMPLETED A COLLEGE DEGREE.

Are you a veteran or currently serving in the military?       No     Yes

Is English the primary language spoken in the home?       No     Yes  
 If no, please state language

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a felony? If yes, please provide date(s) and details.       No     Yes

**ANSWERING YES DOES NOT CONSTITUTE AN AUTOMATIC BAR TO ADMISSION. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION AND REHABILITATION WILL BE TAKEN INTO ACCOUNT. NOTE: YOU ARE NOT OBLIGATED TO DISCLOSE THE EXISTENCE OF ANY CONVICTION OR ARREST RECORDS WHICH HAVE BEEN SEALED OR EXPUNGED PURSUANT TO CHAPTER 20, SECTION 2630/12 OF THE ILLINOIS COMPILED STATUTES.**

## EDUCATIONAL HISTORY

NAME OF HIGH SCHOOL	MONTH/YEAR OF HIGH SCHOOL GRADUATION OR GED
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**IMPORTANT: FAILURE TO LIST BELOW ALL SECONDARY SCHOOLS, UNIVERSITIES AND POST-SECONDARY INSTITUTIONS IN WHICH YOU ENROLLED (INCLUDING CORRESPONDENCE AND EXTENSION COURSES) MAY RESULT IN DELAY IN ADMISSION, LOSS OF TRANSFER CREDIT, AND/OR DISMISSAL. IT IS THE APPLICANT'S RESPONSIBILITY TO HAVE OFFICIAL TRANSCRIPTS FORWARDED FROM EACH INSTITUTION IN WHICH YOU ENROLLED. AN OFFICIAL TRANSCRIPT IS REQUIRED EVEN IF ENROLLMENT WAS FOR A BRIEF TIME AND NO CREDIT WAS ESTABLISHED.**

NAME(S) OF ALL COLLEGE(S) ENROLLED AND CITY/STATE (Undergraduate & Graduate Level)	DATES ENROLLED (check box for the last school attended)	DEGREE CONFERRED	MAJOR	MINOR	GPA
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____

Will you have a bachelor's degree completed prior to enrollment at Benedictine University?       No     Yes

Have you ever applied for admission to Benedictine University?       No     Yes  
 If yes, when?

\_\_\_\_\_

Have you ever been suspended, placed on probation or dismissed from any high school or college?       No     Yes

If yes, please explain the following on a separate sheet of paper: date of occurrence, summary of incident, how you were held accountable (outcomes, sanctions, etc.) and any additional information you wish to provide. Please note: additional information may be requested.

**I understand that I must disclose all schools enrolled and failure to do so can lead to the denial of admission, revoking of admission or administrative withdrawal from course enrollment.**

Have you ever enrolled at Benedictine University?

No     Yes    If yes, dates enrolled

Are you a member of the Phi Theta Kappa International Honor Society?       No     Yes

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## ADMISSIONS INFORMATION

When do you expect to enter Benedictine University?

Fall  Spring  Summer Year \_\_\_\_\_

I will be a:  Full-Time Student (12 hours or more)  
 Part-Time Student (11 hours or less)

On what campus do you plan to attend?

Lisle, IL  Mesa, AZ

I will be a:  Campus Resident  
 Commuter

Have you taken or will you take?

ACT Most recent date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

SAT Most recent date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

## ACADEMIC INFORMATION

PLEASE INDICATE CHOICE OF MAJOR FIELD

### Undecided Major

Undecided Major

### College of Business

- Accounting (Concentration available.)
  - I am applying to the dual admission program with Master of Science in Accountancy  
NOTE: Freshman applicants only
- Business Analytics (Concentration available.)
- Business and Economics (Concentration required.) (Teacher certification available.)
- Business with Science Applications
- Economics
  - I am applying to the dual admission program with Master of Business Administration  
NOTE: Freshman applicants only
- Entrepreneurship (Concentration available.)
- Finance (Concentration available.)
- Human Resource Management (Concentration available.)
- International Business and Economics (Concentration available.)
- Management and Organizational Behavior (Concentration required.)
- Marketing (Concentration available.)
- Undecided Business
- I am interested in applying to the College of Business 4+1 option available with any business major  
NOTE: Freshman applicants only:
  - 4+1 Master of Science in Accountancy
  - 4+1 Master of Science in Business Analytics
  - 4+1 Master of Science in Finance
  - 4+1 Master of Science in Management Information Systems
  - 4+1 Master of Science in Management and Organizational Behavior
  - 4+1 Master of Business Administration

### College of Education and Health Services

- Elementary Education (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Exercise and Sports Studies
- Food and Nutrition Management
- Health Education and Promotion
- Nutrition and Dietetics (Students selecting this major must begin in Pre-Dietetics. General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Nutritional Science
- Physical Education (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Undecided Education and Health Services

### College of Liberal Arts

- Bilingual Journalism
- Communication Arts (Concentration available.)
- Criminal Justice
- English Language and Literature (Teacher certification available.)
- Global Studies (Concentration available.)
- Graphic Arts and Design
- History
- International Studies (Concentration available.)
- Medical Humanities
- Music
- Music Education (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Philosophy
- Political Science (Concentration available.)
- Psychology (Concentration available.)
- Social Science (Teacher certification available.)

- Sociology
- Spanish (Concentration available.) (Teacher certification available.)
- Studio Art (Concentration available.)
- Theology
- Writing and Publishing
- Undecided Liberal Arts

### College of Science

- Biochemistry/Molecular Biology
- Biology (B.A.)
- Biology (B.S.) (Teacher certification available.)
- Chemistry (Teacher certification available.)
- Clinical Laboratory Science (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Clinical Life Science (Perfusion Technology Concentration) (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Clinical Life Science (Respiratory Care Concentration) (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Computer Information Systems
- Computer Science
  - I am applying to the dual admission program with Master of Science in Management Information Systems  
NOTE: Freshman applicants only
- Diagnostic Medical Sonography (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Engineering Science
- Environmental Science
- Health Science
- Mathematics (Concentration available) (Teacher certification available.)

- Nuclear Medicine Technology (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Physics (Concentration available.) (Teacher certification available.)
- Radiation Therapy (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)
- Undecided Science

### Pre-Professional Health Programs (also select a major)

- Pre-Chiropractic
- Pre-Dental
- Pre-Medical
- Pre-Occupational Therapy
- Pre-Optometry
- Pre-Pharmacy
  - I am applying to the Dual Acceptance pharmacy program with Midwestern University (General admission does not guarantee acceptance into this specific degree program. An additional application process will be required later in this academic program.)  
NOTE: Freshman applicants only
- Pre-Physical Therapy
- Pre-Physician Assistant
- Pre-Podiatry
- Pre-Veterinary

### CONCENTRATION

(See catalog, select majors only.)

Please specify:

### DO YOU PLAN TO TEACH?

No  Yes  Undecided

Select one:

- Elementary
- Secondary (Students who wish to teach secondary education must major in a specified subject.)
- Special Education

## FINANCIAL AID INFORMATION (please ✓ ONE box)

I have filed the Free Application for Federal Student Aid (FAFSA).

Date Filed \_\_\_\_\_

I intend to file the Free Application for Federal Student Aid (FAFSA).

I DO NOT intend to file the Free Application for Federal Student Aid (FAFSA) and plan to finance my education out-of-pocket.

Please note that the FAFSA MUST BE filed in order to be considered for state and federal grants and loans. Benedictine's school code is 001767.

## CITIZENSHIP INFORMATION — MUST BE COMPLETED

Are you a U.S. citizen?  Yes  No

If yes, check one:

- By birth
- By naturalization: Naturalization certificate number: \_\_\_\_\_

If no, are you a U.S. permanent resident/immigrant/green card holder?

No  Yes

If yes, please attach a copy of your permanent residency card.

If you are not a U.S. citizen/permanent resident, then please check the appropriate box to indicate your eligible non-citizen status in the U.S.:

- Asylum Granted
- Conditional permanent resident (I-551C)
- Cuban Haitian Entrant
- Other \_\_\_\_\_
- Humanitarian Parole
- Indefinite Parole
- Refugee

If you have checked one of the boxes above, please attach a copy (both sides) of your alien registration card, temporary resident card or other USCIS document indicating approval of current visa status. If you have checked none of the boxes above, then please fill out our International Student Application.

## FAMILY INFORMATION

**PARENT OR GUARDIAN 1**  SINGLE  MARRIED  DIVORCED  SEPARATED  DECEASED

LAST NAME	FIRST NAME
STREET ADDRESS	COUNTY
CITY	STATE      ZIP
TELEPHONE	EMAIL ADDRESS
EMPLOYER	
ADDRESS/CITY/STATE	WORK PHONE

**PARENT OR GUARDIAN 2**  SINGLE  MARRIED  DIVORCED  SEPARATED  DECEASED

LAST NAME	FIRST NAME
STREET ADDRESS	COUNTY
CITY	STATE      ZIP
TELEPHONE	EMAIL ADDRESS
EMPLOYER	
ADDRESS/CITY/STATE	WORK PHONE

PLEASE COMPLETE THIS SECTION IF YOUR PARENT(S) IS AN ALUMNUS OF BENEDICTINE UNIVERSITY, IF YOU ARE A RELATIVE OF A ST. PROCOPIUS MONK, IF YOU HAVE A SIBLING THAT CURRENTLY ATTENDS OR GRADUATED FROM BENEDICTINE UNIVERSITY OR IF YOU OR A FAMILY MEMBER IS CURRENTLY EMPLOYED AT BENEDICTINE UNIVERSITY (PLEASE PROVIDE DEPARTMENT)

NAME	NAME
RELATIONSHIP	DATES ATTENDED/DEPARTMENT

## ATHLETICS

Do you currently participate in varsity athletics? <input type="checkbox"/> No <input type="checkbox"/> Yes	Please indicate the primary and secondary sport in which you wish to participate (M = Men's, W = Women's): <table style="width: 100%;"> <tr> <td><input type="checkbox"/> M Baseball</td> <td><input type="checkbox"/> M Football</td> <td><input type="checkbox"/> W Soccer</td> </tr> <tr> <td><input type="checkbox"/> M Basketball</td> <td><input type="checkbox"/> M Golf</td> <td><input type="checkbox"/> W Softball</td> </tr> <tr> <td><input type="checkbox"/> W Basketball</td> <td><input type="checkbox"/> W Golf</td> <td><input type="checkbox"/> MW Track &amp; Field (indoor &amp; outdoor)</td> </tr> <tr> <td><input type="checkbox"/> W Cheerleading</td> <td><input type="checkbox"/> M Lacrosse</td> <td><input type="checkbox"/> M Volleyball</td> </tr> <tr> <td><input type="checkbox"/> MW Cross Country</td> <td><input type="checkbox"/> W Lacrosse</td> <td><input type="checkbox"/> W Volleyball</td> </tr> <tr> <td><input type="checkbox"/> W Dance</td> <td><input type="checkbox"/> M Soccer</td> <td></td> </tr> </table>	<input type="checkbox"/> M Baseball	<input type="checkbox"/> M Football	<input type="checkbox"/> W Soccer	<input type="checkbox"/> M Basketball	<input type="checkbox"/> M Golf	<input type="checkbox"/> W Softball	<input type="checkbox"/> W Basketball	<input type="checkbox"/> W Golf	<input type="checkbox"/> MW Track & Field (indoor & outdoor)	<input type="checkbox"/> W Cheerleading	<input type="checkbox"/> M Lacrosse	<input type="checkbox"/> M Volleyball	<input type="checkbox"/> MW Cross Country	<input type="checkbox"/> W Lacrosse	<input type="checkbox"/> W Volleyball	<input type="checkbox"/> W Dance	<input type="checkbox"/> M Soccer		Please list all sports in which you are involved and indicate level/position/awards. Attach a separate sheet, if needed. _____ _____ _____ _____
<input type="checkbox"/> M Baseball	<input type="checkbox"/> M Football	<input type="checkbox"/> W Soccer																		
<input type="checkbox"/> M Basketball	<input type="checkbox"/> M Golf	<input type="checkbox"/> W Softball																		
<input type="checkbox"/> W Basketball	<input type="checkbox"/> W Golf	<input type="checkbox"/> MW Track & Field (indoor & outdoor)																		
<input type="checkbox"/> W Cheerleading	<input type="checkbox"/> M Lacrosse	<input type="checkbox"/> M Volleyball																		
<input type="checkbox"/> MW Cross Country	<input type="checkbox"/> W Lacrosse	<input type="checkbox"/> W Volleyball																		
<input type="checkbox"/> W Dance	<input type="checkbox"/> M Soccer																			
Are you interested in participating in intercollegiate sports at Benedictine University? <input type="checkbox"/> No <input type="checkbox"/> Yes																				

## EXTRACURRICULAR ACTIVITIES

Please list all school, church and community activities you are involved in. Please do not abbreviate the names of clubs or organizations. Attach a separate sheet, if needed. _____ _____ _____ _____ _____	Are you interested in participating in extracurricular activities at Benedictine University? <input type="checkbox"/> No <input type="checkbox"/> Yes Are you or have you ever been an employee of Benedictine University? <input type="checkbox"/> No <input type="checkbox"/> Yes Occupation _____ Work Phone _____ Employer _____ Are you interested in participating in the Army ROTC Program at Benedictine University? <input type="checkbox"/> No <input type="checkbox"/> Yes Are you interested in participating in a music program? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Band <input type="checkbox"/> Choir <input type="checkbox"/> Orchestra <input type="checkbox"/> Pep Band <input type="checkbox"/> Marching Band Have you ever attended a sports or academic camp at Benedictine University? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list which one(s) _____
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## NON-DISCRIMINATION POLICY

In administering its affairs, Benedictine University does not discriminate against any person on the basis of race, creed, color, national or ethnic origin, sex, age, disability, military or veteran status, marital status, citizenship, or any other characteristic protected by applicable law. The laws applicable to Benedictine University include constitutional and statutory protections of the University's rights as a religiously sponsored institution.

## READ CAREFULLY AND SIGN AS INDICATED

I AGREE TO COMPLY WITH THE REGULATIONS AND REQUIREMENTS OF BENEDICTINE UNIVERSITY, AND TO COOPERATE WITH THE ADMINISTRATIVE OFFICERS, FACULTY AND MY FELLOW STUDENTS IN MAINTAINING HIGH STANDARDS OF CONDUCT AND SCHOLARSHIP AND IN PROMOTING THE GENERAL WELFARE OF THE UNIVERSITY. I UNDERSTAND THAT THE UNIVERSITY RESERVES THE RIGHT TO CANCEL THE REGISTRATION OF ANY STUDENT AT ANY TIME WHATSOEVER FOR REASON OF DEFICIENCY IN SCHOLARSHIP, UNSATISFACTORY CONDUCT, OR FOR ANY OTHER JUST CAUSE. I AGREE TO PAY ALL FEES IN ADVANCE EACH SEMESTER OR BY SPECIAL ARRANGEMENT WITH THE UNIVERSITY. I CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS TO THE BEST OF MY KNOWLEDGE CORRECT AND COMPLETE. FAILURE TO PRESENT ACCURATE INFORMATION IN THIS DOCUMENT CAN LEAD TO THE DENIAL OF ADMISSION, REVOKING OF ADMISSION OR ADMINISTRATIVE WITHDRAWAL FROM COURSE ENROLLMENT. I HEREBY AUTHORIZE BENEDICTINE TO INVESTIGATE ANY STATEMENT CONTAINED IN THIS APPLICATION.

I HEREBY RELEASE ANY PARTY FROM LIABILITY AS A RESULT OF ANY INFORMATION PROVIDED TO BENEDICTINE. IT IS UNDERSTOOD THAT I ACCEPT REGISTRATION AS A STUDENT AT BENEDICTINE SUBJECT TO THE ABOVE PROVISIONS. I UNDERSTAND THAT COMMUNICATIONS, INCLUDING UNIVERSITY FINANCIAL/STUDENT LOAN INFORMATION AND OTHER NOTIFICATIONS WILL BE SENT VIA MY BENU EMAIL ACCOUNT. I ACCEPT RESPONSIBILITY TO MAINTAIN SAID ACCOUNT. (IF YOU PREFER TO RECEIVE PAPER NOTIFICATION, PLEASE SUBMIT A WRITTEN STATEMENT TO THE OFFICE OF FINANCIAL AID.)

I GIVE BENEDICTINE UNIVERSITY PERMISSION TO USE MY LIKENESS IN PHOTOGRAPHS AND/OR VIDEO IN ANY AND ALL OF ITS PUBLICATIONS, INCLUDING WEBSITES AND PAGES, AND IN ANY AND ALL OTHER MEDIA, WHETHER NOW KNOWN OR HEREAFTER EXISTING, CONTROLLED BY BENEDICTINE UNIVERSITY, IN PERPETUITY, AND FOR OTHER USE BY THE UNIVERSITY INCLUDING BUT NOT LIMITED TO PROMOTING THE UNIVERSITY AND ITS PROGRAMS AND ACTIVITIES. ALL PHOTOS TAKEN ARE WITHOUT COMPENSATION TO ME (THE UNDERSIGNED). ALL ELECTRONIC OR NON-ELECTRONIC NEGATIVES, POSITIVES AND PRINTS ARE OWNED BY THE UNIVERSITY.

**I HEREBY ACKNOWLEDGE THAT I AM 18 YEARS OF AGE OR OLDER AND HAVE READ AND UNDERSTAND THE TERMS OF THIS APPLICATION AND RELEASE.**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT OR GUARDIAN\*

\_\_\_\_\_  
DATE

\*REQUIRED IF APPLICANT IS 17 YEARS OF AGE OR YOUNGER