



Applicant: Please email a copy of the completed form as an attachment to graduate@nku.edu.

Name	Former/Maiden/Other Name
School E-mail Address	Telephone Number
Other E-mail Address	

[illegible][illegible][illegible]

Record of Academic Experience (Please list all institutions attended, even if just for one class):

University/College	Level (Grad or Undergrad)	Dates yy-yy	Degree Earned or approximate hours if no degree

Verification:

I understand that withholding information on this application, giving false information or submitting false documentation will make me ineligible for admission. If discovered after enrollment, there is the possibility of suspension or dismissal due to the providing of false information. With this in mind, I certify that the above statements are correct and complete.

TO APPLICANT: Your typed name (below) serves as your digital signature.

Full name:

Date: