GCU Application Checklist

GEORGIA CENTRAL UNIVERSITY

6789 Peachtree Ind. Blvd. Atlanta, GA 30360
(P) 678-535-7771
admissions@gcuniv.edu www.gcuniv.edu

INSTRUCTIONS TO ALL APPLICANTS

Please answer all the questions applicable to you for each document.

- Submit the following:
  - All Application Documents
  - $100 Application Fee
  - Additional Materials for Each Program
- Request the following:
  - Official Transcript(s)
  - Certificate of Immunization (Form F)
  - Recommendation Letter(s)

DEGREE PROGRAMS & MAJORS

School	Degree/Program
School of Christianity	BA in Theological Studies
	BA in Christian Education
School of Divinity	MA in Christian Education
	MA in MSWC
	Master of Divinity (M.Div.)
	Doctor of Ministry (D. Min.)
	Ph.D. in Intercultural Studies
School of Business Management	BA in Business Administration
	MBA
School of Music	BA in Music
	MA in Music
	Doctor of Musical Arts (DMA)
School of Computer Science	AA in Computer Science
	BA in Computer Science
Certificate Programs	Computer Science (Networking)
	Theological Studies
	ESOL

CHECKLIST for Application Documents

☐ **Form A-1** Application (attach a color photo)
입학 지원서 (사진 1 매 부착)

☐ **Form A-2** A Self-Description & Study Plan (이력 및 자기소개) *undergraduate & graduate* 학사 및 일반과정 석사

☐ **Form A-3** SD Applicant Only 신대원 지원자용

☐ **Form B-1** Recommendation Letter from respective teacher, professor, or pastor
(교사, 교수, 목사 추천서 – 학사/일반대학원)

☐ **Form B-2** Recommendation Letter from a pastor: SD Applicant Only (목사 추천서: 신학대학원 지원자 용)

☐ **Form C & D** Student Disclosure Agreement & Release and Assignment

☐ **Form E** Biblical Foundation Statement

☐ **Form F** Certificate of Immunization

☐ **Form G** Assumption of R & L Release

☐ **Government-issued Photo ID (**US Passport or Driver's License)
미국 여권 (시민권자)/면허증 사본

☐ **Diploma or GED Certificate (Undergraduate Applicant Only)**
고등학교 졸업장 사본 (학부과정 지원자 용)

☐ **Official Transcript(s)** 성적 증명서
Bachelor 학사( ) /Master 석사( )

☐ **Proof of English Proficiency** (TOEFL or GCU ESOL)

☐ **$ 100 Application Fee** (Nonrefundable)

International Students Only

☐ International Passport 여권 사본 & I-94 사본
☐ International Application Form I 1-3
☐ The bank statement with a minimum of USD $25,000 은행 잔고 증명서 ($25,000)

FORM A-1 APPLICATION FOR ADMISSION

Georgia Central University

Photo
(사진)

A. Application Information

Application Term	Application Type	Admissions	Bachelor's	Office Use Only
☐ Spring ☐ Fall 20____ ☐ Summer	☐ Freshman ☐ Transfer ☐ International	☐ Undergraduate ☐ Graduate ☐ Certificate	**Check if** ☐ First Degree	Student ID # :_____ Program: _____

B. Student Information

Full Legal Name (Last, First)		Name in Other Language	Gender	Date of Birth
			☐ M ☐ F	
Nationality*	Current Visa Status	Marital Status	Cell Phone	
		☐ Single ☐ Married		

Contact Number in USA	Number in Other than USA	E-mail Address

Current Mailing Address

Permanent Mailing Address (Country of Origin Address)

Place of Birth (City/Country)	First Language	Second Language

C. Emergency Contact

Contact 1	Full Legal Name	Relationship	Contact Number
	Note	Mailing Address	
Contact 2	Full Legal Name	Relationship	Contact Number.
	Note	Mailing Address	

D. Educational History

	Name of HS, College, University	City/Country	Start-End	Major	Earned Degree
High School, College, University (Start from High School)					

E. Academic Program

Certificate	AA & Bachelor's	Master's	Doctoral
☐ Theological Studies ☐ ESOL ☐ Networking (CS)	☐ AA in Computer Science	☐ Christian Education	☐ Ministry (DMIN) ☐ Music (DMA) ☐ Ph.D. in IS
	☐ BA in Theological Studies	☐ Mission Studies	
	☐ BA in Christian Education	☐ Music	
	☐ BA in Computer Science	☐ Divinity	
	☐ BA in Business Administration	☐ MBA	
	☐ BA in Music		

For students applying for School of Divinity (MACE, MAMSWC, MDIV, DMIN, & PH.D.) complete followings:

Name of Church		Date of Ordination	
Denomination		Ordained Denomination	
Location		Pastor's Name (Current)	

Applicant's Signature

I certify that all information submitted in the admission process -including the Application, any supplements, and any supporting materials- is my own work, factually true and honestly presented.

Signature _____ Date _____

***Georgia Central University does not discriminate** on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, physical disability, learning disability, political affiliation, and veteran status.

GEORGIA
CENTRAL UNIVERSITY

FORM A-3 VOCATIONAL BACKGROUND & FUTURE RESEARCH PLAN

Master's Program Applicant: Vocational Background

Write 2-3 pages long about your vocational background, explaining your salvation experience and call for ministry 중생의 확신과 목회/사역적 소명을 2-3 페이지 분량으로 쓰시오.

D. Min & Ph.D. Applicant: **Future Research Plan**

Write 2-3 pages long about your research plan, including topic, motivation, purpose, necessity, methods, and/or contents. 목회학 박사 또는 철학 박사 학위를 위한 논문 계획서를 연구제목, 동기, 목적, 필요성, 방법, 연구내용 등의 순서로 2-3 페이지 쓰시오.

GEORGIA CENTRAL UNIVERSITY

FORM B - PERSONAL REFERENCES

FORM B-1 Undergraduate & Graduate

TO THE APPLICANT

After completing all the relevant questions in the box below, please give this form to a teacher, a professor, or a pastor who has taught or known you for more than one year. If applying via mail, please also give him or her stamped envelopes addressed to GCU (6789 Peachtree Industrial Blvd., Atlanta, GA 30360).

Legal Name:_____ Semester:_____
Last, First *Spring/Summer/Fall Year*

Address:_____ Date of Birth:_____
Number of Street City State Zip Code *mm/dd/yyyy*

IMPORTANT PRIVACY NOTE: By signing this form, I authorize the admission officers reviewing my application to contact my reference(s), should they have questions about the school documents submitted on my behalf.

I understand that under the FERPA (Family Education Rights and Privacy Act), after I matriculate, I will have access to this form and all other recommendations and supporting documents submitted by me and on my behalf, unless of least one of the following is true:

1. The institution does not save recommendations post-matriculation (See list at https://studentprivacy.ed.gov/)
2. You may or may not waive your right-to-access below (mark one box), regardless of the institution to which they are sent:

☐ Yes, I do waive my right to access, and I understand I will never see this form or any other recommendation submitted by me or on my behalf.
☐ No, I do not waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

Required Signature: _____ **Date:** _____

TO THE TEACHER, PROFESSOR, OR PASTOR (SD applicant – to the professor from previous school)

Georgia Central University finds candid evaluations helpful in choosing from highly qualified candidates. Please submit your references promptly and remember to sign below before mailing directly to Georgia Central University Office of the Admissions. Please feel free to attach an additional sheet or another reference to answer the following questions.

Name (Mr./Mrs./Ms./Dr.)_____ **Position:** _____

Address: _____
Number of Street City State Zip Code

Background Information & Questions

1. How long have you known the applicant and in what context? _____
   _____
   _____
2. What are the first words that come to your mind to describe this applicant?
   _____
   _____
   _____
3. Would you conscientiously recommend this applicant for admission here?
   _____

4. Please list the name and address of another person who might give us a competent assessment of this applicant?

_____

Ratings: Please rate the applicants on the following characteristic:

	Low 1	2	Average 3	4	Very High 5
Academic Achievement					
Concern for Others					
Consecration to God's Will					
Integrity					
Leadership Ability					
Maturity					
Motivation					
Moral Character					
Responsibility					
Respect					
Self Confidence					
OVERALL					

Signature: _____ Date: _____

Additional Evaluation: Please write whatever you think is important about this student. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student. We welcome any information that would help us to differentiate this student from others.

Please complete this form and mail to:

The Office of Admissions
Georgia Central University
6789 Peachtree Ind. Blvd.
Atlanta, GA 30360
(P) 678-535-7771

GEORGIA CENTRAL UNIVERSITY

FORM B - PERSONAL REFERENCES

FORM B-2 School of Divinity Applicant Only: Pastor (신대원 지원자용 – 목회자 추천서)

TO THE APPLICANT

After completing all the relevant questions in the box below, please give this form to a teacher, a professor, or a pastor who has taught or known you for more than one year. If applying via mail, please also give him or her stamped envelopes addressed to GCU (6789 Peachtree Industrial Blvd., Atlanta, GA 30360).

Legal Name: _____ Semester: _____
Last, First *Spring/Summer/Fall Year*

Address: _____ Date of Birth: _____
Number of Street City State Zip Code *mm/dd/yy*

IMPORTANT PRIVACY NOTE: By signing this form, I authorize the admission officers reviewing my application to contact my references, should they have questions about the school documents submitted on my behalf.

I understand that the FERPA (Family Education Rights and Privacy Act), after I matriculate, I will have access to this form and all other recommendations and supporting documents submitted by me and on my behalf, unless of least one of the following is true:

1. The institution does not save recommendations post-matriculation (See list at https://studentprivacy.ed.gov/)
2. You may or may not waive your right-to-access below (mark one box), regardless of the institution to which they are sent:

☐ Yes, I do waive my right to access, and I understand I will never see this form or any other recommendation submitted by me or on my behalf.
☐ No, I do not waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

Required Signature: _____ **Date:** _____

TO THE PASTOR

GCU School of Divinity finds candid evaluations helpful in choosing from highly qualified candidates. Please submit your references promptly and remember to sign below before mailing directly to Georgia Central University Office of Admissions. Please feel free to attach an additional sheet or another reference to answer the following questions.

Pastor's Name (Mr./Mrs./Ms./Dr.) _____ **Position:** _____

Address: _____
Number of Street City State Zip Code

Denomination: _____ **Name of the Church:** _____

Background Information & Questions

1. How long have you known the applicant? _____
2. Do you feel confident that the applicant has a sense of drive leading into vocational Christian service?
   _____
3. Does the applicant have any personal habits, such as smoking or drinking, which might make him or her uncomfortable with school restrictions on life-style?
   _____
4. In what area of Christian work is the applicant now engaged? _____
5. Do you have any knowledge of financial responsibility on the part of this applicant?
   _____

6. Has the applicant ever been divorced, or is he/she married to a person who has been divorced?_____

_____

7. If married, does the applicant's spouse support his/her commitment to the Christian ministry? _____

_____

8. Please indicate any physical, mental, or personality deficiencies?_____

_____

9. Would you feel comfortable having this applicant work in your church should the occasion arise?

_____

10. Would you conscientiously recommend the applicant for admission?_____

11. Please list the name and address of another person who might give us a competent assessment of this applicant?

_____

Ratings: Please rate the applicants on the following characteristic:

	Low 1	2	Average 3	4	Very High 5
Academic Achievement					
Concern for Others					
Consecration to God's Will					
Integrity					
Leadership Ability					
Maturity					
Motivation					
Moral Character					
Responsibility					
Respect					
Self Confidence					
OVERALL					

Signature: _____ Date: _____

Additional Evaluation: Please write whatever you think is important about this student. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student. We welcome any information that would help us to differentiate this student from others.

Please complete this form and mail to:

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GEORGIA
CENTRAL UNIVERSITY

FORM C - STUDENT DISCLOSURE AGREEMENT

Please read this Agreement carefully and sign at the bottom of the page.

1. I have read Georgia Central University Catalog and Student Handbook and have enrolled with full knowledge of its standards and practices for postsecondary education.
2. I understand that attendance at Georgia Central University is a privilege and not a right. Student forfeit this privilege if they do not conform to the standards and ideals of work and life of the University, and the University may insist on the withdrawal of a student at any time that the student, in the opinion of the University, does not conform to the spirit of the foundation.
3. I understand the required fees, tuition and refund policy of Georgia Central University.
4. I understand that the catalog contains current information regarding the University's calendar, fees, admissions policies, degree requirements, regulations and course offerings, and that Georgia Central University reserves the right to withdraw a course at any time; change tuition and other fees; revise the calendar and rules regarding admission and graduation requirements; and revise any other regulations affecting the student body. Revisions shall become effective whenever the proper authorities so determine and shall, at the discretion of such authorities, apply not only to prospective students but also to those who at that time are matriculated in the University.
5. I understand the student dismissal policy of Georgia Central University.
6. I understand that the ministry educational programs offered by Georgia Central University are designed for ecclesiastical vocations.
7. I understand that Georgia Central University is not accredited by any agency under the guidance of the United States Department Education, and that the transfer of credit is left to the discretion of the receiving institution.
8. I understand that Georgia Central University is not responsible for my employment with any church, denomination, religious or secular organizations and entities with which I make application.
9. I understand that all course work required for credit at Georgia Central University must be my own work.
10. I understand that I will be responsible for all unpaid fees and incurred interest expenses and will not be able to receive official documents including transcripts until such fees are paid in full.
11. I understand the context of Release and Assignment Form which is required to be submitted prior to admission. In the event that a photographer or video camera person of Georgia Central University takes a picture with me in it, either singly or in a group, I give permission for my picture to be used in future brochures, videotapes or other publications of Georgia Central University.
12. I have not been misled in my inquiry for enrollment with Georgia Central University and hold the University harmless from all of my own misunderstandings.

I have read this form carefully and understand the consequences of my decision to agree on each agenda prescribed above.

Applicant Name (Please Print): _____

Signature: _____

Date: _____

This form should be retained for five (5) years in the student file.

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FORM D - RELEASE AND ASSIGNMENT

To: GEORGIA CENTRAL UNIVERSITY

Georgia Central University (herein called GCU) and/or its authorized employees, representatives or agents may perform audio/video recordings and take photographs of me from my registration and enrollment until my graduation or the termination of my student status at GCU. With respect to all such images and recordings, and reproductions of same in any medium, including the World Wide Web for valuable consideration, I hereby irrevocably:

(a) Consent to and authorize their use by GCU, or anyone authorized by GCU, for reproduction, distribution, sales and exhibition and in any medium including, but not limited to the sale publication, display and exhibition thereof for educational purposes, promotion, advertising, and trade without any compensation or notice to me.

(b) Consent to the use of my name, and

(c) Grant and assign to GCU the right to secure copyright reproductions of same in any medium

(d) Release, discharge and acquit GCU from any claims, demands or causes of actions that I hereinafter have against GCU by reason of anything contained in such images, recordings and reproductions thereof or in the advertising or publicizing thereof.

This release shall apply to GCU, as well as GCU's subsidiaries, affiliates, successors and representatives.

Date: _____

Name in Full: _____

Signature: _____

GEORGIA CENTRAL UNIVERSITY

FORM D 초상권 양도서 (Korean Translation)

조지아 센추럴 대학교 관계자 귀하

조지아 센추럴 대학교 (GCU)및/또는 대학으로부터 인허 받은 직원 및 관계자들은 본인이 GCU 의 학생으로 등록 및 수강신청을 하는 시점으로부터 졸업일 또는 대학 학생신분의 말소 시까지 본인에 대한 사진/동영상 촬영이나 음성 녹음을 할 수 있으며, 상기 명명된 저작물에 대해 인터넷을 포함한 각종 영상 매체를 통해 이를 재생할 수 있는 권리를 갖습니다. 이에 대해 본인은:

가) 조지아 센추럴 대학교와 대학 직원 및 관계자들이 상기 저작물을 교육이나 광고의 목적으로 어떤 형태도른 복제, 배포, 판매, 전시할 수 있음에 동의합니다.
나) 본인 이름의 사용에 동의합니다.
다) 조지아 센추럴 대학교에 본인 사진의 저작권을 양도합니다.
라) 본인의 사진, 동영상, 음성녹음의 복제에 대한 청구, 요구, 소송의 모든 권리를 이양, 포기합니다.

이 양도는 조지아 센추럴 대학교와 조지아 센추럴 대학의 관련기관, 관계기관 및 후진들에게 양도될 수 있습니다.

Date: _____

Name in Full: _____

Signature _____

GEORGIA CENTRAL UNIVERSITY

FORM E - BIBLICAL FOUNDATIONS STATEMENT (Student)

Georgia Central University (GCU) is a Jesus Christ centered institution of higher learning that is unwavering in its belief that the doctrinal statements are foundational to the educational and spiritual growth of each GCU trustee, faculty, student and staff member.

- We believe that there is one God, eternally existing in three persons: Father, Son, and Holy Spirit.
- We believe the Bible to be the inspired, the only infallible, authoritative Word of God.
- We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious atonement through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal and visible return in power and glory.
- We believe that man was created in the image of God, that he was tempted by Satan and fell, and that, because of the exceeding sinfulness of human nature, regeneration by the Holy Spirit is absolutely necessary for salvation.
- We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life, and by Whom the church is empowered to carry out Christ's great commission.
- We believe in the bodily resurrection of both the saved and the lost; those who are saved unto the resurrection of life and those who are lost unto the resurrection of damnation.

Note: Each Faculty, Staff, Board member, and Student at GCU shall subscribe over his/her signature to the foregoing Biblical Foundations Statement. GCU has determined that board members, faculty, staff and students only need to re-sign the Biblical Foundations Statement if there are any changes.

AGREEMENT

I have read, understand, and respect the Biblical Foundations Statement of Georgia Central University.

Full Name: _____

Signature: _____

Date: _____

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Form E - Biblical Foundations Statement (신앙선언문 한글 번역)

GCU 는 그리스도 중심의 고등교육 기관으로서, 다음의 확고한 신앙적 교리들을 GCU 모든 이사들과 교직원 및 학생들의 교육과 영적 성숙의 기초로 삼는다:

- 하나님은 유일하신 분으로, 아버지, 아들, 성령 삼위로서 영원히 존재하심을 믿는다.
- 성경은 오류가 없는 하나님의 유일하게 영감 된 말씀으로서 권위를 가진다고 믿는다.
- 신 이신 우리 주 예수그리스도는 처녀의 몸을 통해 나셨고, 죄가 없으시며, 기적들을 행하셨고, 피를 흘려 우리를 대속해 주셨고, 몸이 부활하시어 하늘에 오르셨고 아버지 하나님 우편에 계시며, 영광과 능력으로 우리 모두가 볼 수 있도록 다시 오실 것을 믿는다.
- 인간은 하나님의 형상대로 창조되었고, 마귀의 시험으로 타락했으며, 이로 인한 죄 된 인간 본성 때문에 성령에 의한 중생을 통해야만 구원에 이를 수 있다고 믿는다.
- 그리스도인들 안에 내주하시는 성령의 역사로 신자는 경건한 삶을 살 수 있고, 교회는 그리스도의 대위임을 실천할 수 있는 능력이 있다고 믿는다.
- 구원받은 자들과 구원받지 못한 자들의 육체적 부활을 믿는다; 구원받은 자들은 생명의 부활에, 구원받지 못한 자들은 심판의 부활에 이르게 될 것을 믿는다.

GEORGIA CENTRAL UNIVERSITY

6789 Peachtree Industrial Blvd., Atlanta, GA 30360
TEL (678)-535-7771
admissions@gcuniv.edu, www.gcuniv.edu

FORM F - Certificate of Immunization*

STUDENT INFORMATION

Name: _____ Date of Birth: _____

IMMUNIZATION INFORMATION

VACCINE	DATE MM/DD/YY	DATE MM/DD/YY	DATE OF POSITIVE LAB EVIDENCE
MMR	/ /	/ /	/ /
Measles	/ /	/ /	/ /
Mumps	/ /	/ /	/ /
Rubella	/ /	/ /	/ /

CERTIFICATION OF HEALTH CARE PROVIDER

Name: _____ Phone: _____

Signature: _____ Date: _____

EXEMPTIONS

- ☐ Request for Religious Exemption: I affirm that immunization required by the Georgia Central University is in conflict with my religious beliefs. I understand I am subject to exclusion and reimbursement of any medical expenses in the event of an outbreak of a disease for which immunization is required.
- ☐ Request for Medical contraindication (Attach Verification by HealthCare Provider)
- ☐ Distance Education (Overseas): I declare that I will be enrolling in only courses offered by Distance Education (outside the USA). I understand that if I register for a course offered on campuses, this exemption becomes void and I will be excluded from class until I provide proof of immunization.

Student Signature_____ Date: _____

*Other form(s) of Medical document may be acceptable.

Revised 02/26/2019

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FORM G - Assumption of Risk and Liability Release

After reviewing this form, please fill out all information and place your signature where required, authorizing your participation in the_____program at/through Georgia Central University Inc.

PLEASE **PRINT**

Student's Name: _____

Address: _____

City/State: _____ Zip Code_____

Home Phone: _____ Mobile Phone(s): _____

I, _____, assume the risks of personal injury and/or property damage in participating in the Program of_____("Program") at Georgia Central University Inc. ("GCU"). I understand that any violation of campus rules may result in termination of my attendance in the program and/or judicial charges.

I hereby release any and all rights for claims and damages I may have against GCU now and in the future, its trustees, officers, employees and agents, facilities including faculty, staff members and supervisors, in any manner due to any personal injury or property loss sustained while enrolled or attending Georgia Central University; this includes travel to and from Program's destination(s) and all campuses and/or my participation in the activities associated with Georgia Central University Inc., including any activities I may engage in during my free time while participating in GCU Programs. I will not hold GCU responsible for liability for injury or damages arising from the result of my participation and attendance at Georgia Central University, unless it is due to willful or intentional misconduct or negligence on the part of GCU.

GEORGIA
CENTRAL UNIVERSITY

I acknowledge that Georgia Central University does not offer the opportunity to purchase health coverage from a Health Cooperative or any other Health Coverage Options Policies. for myself or my dependents through my enrollment at Georgia Central University.

Please read and initial the options below indicating your current insurance status and preferences:

_____Student medical insurance coverage information (international students see below)

Insurance company name_____: Policy no._____

_____I hereby give permission for the staff members coordinating my admission to authorize emergency medical care on my behalf, if necessary, while enrolled at Georgia Central University.

_____I do not wish to enroll myself in any type of medical coverage at this time. I do not wish to enroll my spouse or child(ren) in any type of medical coverage at this time.

_____I am fully qualified to meet the physical and technical requirements necessary to participate in any programs or activities at Georgia Central University. I am at least 18 years old and I enter this agreement voluntarily.

FOR INTERNATIONAL STUDENTS

I understand that I must provide proof of health, medical, and/or accident insurance to the Office of Admissions as part of my application to GCU. I understand that, while GCU may provide clerical assistance to students in obtaining insurance, this assistance is only insofar as helping with completion of forms, etc., and that GCU cannot and does not accept responsibility for student insurance, copayments, premium payment or rates, or any other part of students' insurance policies.

Student Signature: _____Date: _____

* * * * * * * * * * * * * * * *

Signature of Parent/Guardian if participant is not at least 18 years old:

Signature: _____Date: _____

Parent's Name(s): _____

Parent's Contact Number(s): _____

Parent's Address: _____

NOTE: If you currently have a condition (i.e. medical, disability or other issues) that will require accommodation in order to attend Georgia Central University, please contact the Office of Admissions who is(are) handling your admissions process. Some elements may be out of the control of GCU and therefore, alternative options must be discussed with the faculty/staff members.

GEORGIA CENTRAL UNIVERSITY

6789 Peachtree Industrial Blvd., Atlanta, GA 30360
Tel: 678-535-7771
admissions@gcuniv.edu | www.gcuniv.edu

ENROLLMENT AGREEMENT

STUDENT INFORMATION

PLEASE PRINT OR TYPE ❑ New Student ❑ Re-Entry

Student Legal Name: _____
(First) (Middle) (Last)

Student ID: _____ Date of Birth: _____

Home Telephone: _____ Work: _____ Cell: _____

Address: _____ City _____ State _____ Zip _____

Email Address: _____

Emergency Contact: _____ Telephone: _____

Relationship: _____

PROGRAM INFORMATION

Program Name: _____ Program Level: _____

Program Objectives: _____

_____

_____

_____

Term: ❑ Fall 20_____ ❑ Spring 20_____ ❑ Summer 20_____

Program Start Date: _____ Scheduled End Date: _____

❑ Full Time ❑ Part Time ❑ Day ❑ Evening Number of Weeks: _____ Total Clock/Credit Hours: _____

Days Class Meets: ❑ Mon ❑ Tues ❑ Wed ❑ Thurs ❑ Fri ❑ Sat ❑ Sun

Schedule Notes: _____

TUITION INFORMATION[1]

Check the box for the program in which you are enrolling and for the fees associated with that program.

Program		Credit Hours	Tuition per Credit	Fees
Undergraduate Degree Programs				
❑	Associate of Arts in Computer Science (AACS)	65	$250	Application Fee*: ❑ $100 (New students only/non-refundable)
❑	Bachelor of Arts in Computer Science (BACS)	128	$300	Enrollment Fee[2]: ❑ $100/course ❑ $200/online course Or ❑ $300/3+ courses ❑ $600/3+ online courses
❑	Bachelor of Arts in Theological Studies (BATS)	126	$270	
❑	Bachelor of Arts in Christian Education (BACE)	126	$270	
❑	Bachelor of Arts in Business Administration (BABA)	126	$300	
❑	Bachelor of Arts in Music(BAM)	126	$300	Music Facility: ❑ $300

Program		Credit Hours	Tuition per Credit	Fees
Graduate Degree Programs				
❑	Master of Arts in Christian Education (MACE)	60	$300	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $100/course ❑ $200/online course Or ❑ $300/3+ courses ❑ $600/3+ online courses Admissions Fee: ❑ $500 Music Facility: ❑ $400
❑	Master of Arts in Mission Studies & World Christianity (MAMSWC)	60	$300	
❑	Master of Divinity (MDIV)	90	$300	
❑	Master of Arts in Music (MAM)	48	$400	
❑	Master of Business Administration (MBA)	36	$490	
Doctoral Degree Programs				
❑	Doctor of Ministry (DMIN)	36	$450	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $400 (non-refundable) Admissions Fee: ❑ $500(non-refundable)
❑	Doctor of Musical Arts (DMA)	60	$550	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $600 (non-refundable) Admissions Fee: ❑ $1,000 (non-refundable) Music Facility: ❑ $500 (non-refundable)
❑	Doctor of Philosophy in Intercultural Studies (PhD)	60	$550	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $600 (non-refundable) Admissions Fee: ❑ $1,000 (non-refundable)
Certificate Programs				
❑	Certificate in Computer Science (Networking)	37	$200	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $100/course ❑ $200/online course Or ❑ $300/3+ courses ❑ $600/3+ online courses
❑	Certificate in Theological Studies	25	$100	
Other				
❑	Undergraduate Course Audit		$250/course	Application Fee*: ❑ $100 (New students only/non-refundable) Enrollment Fee[2]: ❑ $100/course Or ❑ $300/3+ courses
❑	Graduate Course Audit		$350/course	
❑	English for Speakers of Other Languages (ESOL)		$1,500/8-week session	

Other Fees

Check all the boxes that apply to you and to the program in which you are enrolling.

ONE-TIME			
❑	Orientation Fee	All new students	$100
❑	Security Tuition Deposit	❑ All AA, BA, MACE, MAMSWC, and MDIV J1 students	$3,000
		❑ All MBA and MAMUS J1students	$5,000
		❑ All Doctoral J1students	$5,000
❑	SEVIS J-1 Application*	All J1 Student applicants	$100
❑	SEVIS I-901 Fee	All J1 Student applicants	$220
❑	International Student Fee	All J1 Student applicants	$500
❑	Graduation Fee[3]*	❑ All undergraduate & graduate students who complete degree requirements	$300
		❑ All DMIN students who complete degree requirements	$1,200
		❑ All DMA and PhD students who complete degree requirements	$1,500
MISC			
❑	Late Registration*	Additional administrative charge for registering late	$100
❑	Tuition Installment*	❑ 2-payment plan	$100
		❑ 3-payment plan	$150
❑	Thesis Advisement	All Master students	$600
❑	Thesis Continuation	All Master students	$300
❑	Official Transcript	❑ Administrative fee for regular official transcript requests	$5
		❑ Administrative fee for express official transcript requests	$30

❑	Proposal Guidance	❑ All DMIN students	$500
		❑ All DMA & PhD students	$600
❑	Dissertation Tuition	❑ All DMIN students (9 units; 1 semester)	$3,150
		❑ All DMA & PhD students (12 units; 1 semester)	$6,600
❑	Dissertation Advisement	All Doctoral students	$1,000
❑	Continuance	❑ All Doctoral students (per semester until graduation)	$500
		❑ All Doctoral J1 Students (per semester until graduation)	$1,200
❑	Apostille	Per document	$30
❑	Music Facility	All School of Music students	$300(BA)
❑	Registration	Summer or special sessions	$50
❑	Technology	Summer or special sessions	$50
❑	Student ID Reproduction	Replacement cost of student ID	$10
❑	Insufficient Fund Charge*	Administration fee for a returned payment	$50
❑	Late Payment Interest*	Administration annual interest fee for a late payment	18%
❑	Credit Card Convenience	Administration fee for a payment made with credit card	2.5%

FOR OFFICE USE ONLY

Determine the total tuition, total fees, and total owed this term, and have the student put his/her initials in each column. **Initials**

TERM: ❑ Fall 20 _____ ❑ Spring 20 _____ ❑ Summer 20 _____

TOTAL TUITION *(Tuition per credit x total credits the student is enrolled in)*: **$** _____ _____

TOTAL FEES *(Sum of all applicable fees)*: **$** _____ _____

TOTAL CHARGES FOR THIS TERM *(Sum of total tuition and total fees)*: **$** _____ _____

[1] *Please make payment payable to "G.C.U." or "Georgia Central University." All tuition and fees are due at the time of registration.*

[2] *The Enrollment Fee for the certificate/undergraduate/graduate programs, course audits, and ESOL include 1 Course Registration fee $25, Technology Fee $50, and Institutional Fee $25 OR 3 or more Course Registration fee $75, Technology Fee $150, and Institutional Fee $75. The Enrollment Fee for the Doctor of Ministry program includes Registration fee $100, Technology Fee $200, and Institutional Fee $100. The Enrollment Fee for the Doctor of Musical Arts, Registration fee $175, Technology Fee $250, and Institutional Fee $155. Doctor of Philosophy programs, Registration fee $125, Technology Fee $250, and Institutional Fee $125.*

***The Graduation Fee for undergraduate/graduate programs includes a Cap & Gown fee $140 and a Commencement Ceremony fee $160. The Graduation Fee for the Doctor of Ministry program includes a Dissertation Binding fee $1,000 (10 copies) and a Commencement Ceremony fee $200. The Graduation Fee for the Doctor of Musical Arts and Doctor of Philosophy programs includes a Dissertation Binding fee $1,300 (10 copies) and a Commencement Ceremony fee $200.*

** Application fees, graduation fees, late registration fees, insufficient fund fees, and late payment interests are non-refundable.*

REFUND POLICY

Tuition may be refunded as provided below. To formally withdraw, a student must submit an Official Withdrawal Request Form to the Office of Admissions and a dated and signed Tuition Refund Request Form to the Office of Business Affairs as soon as possible after deciding to withdraw. A student will be issued a refund if the last date of attendance is on or before the date marking the midpoint of the semester or academic session.

A student may receive a refund for overpayment, withdrawal from classes, or dismissal from the University. There is no administrative fee for discontinuing as a student of the University. All refunds are issued within 30 days of the date of withdrawal; however, if overseas delivery is required, actual delivery may take several days beyond this 30-day period.

Refunds are determined based on prorating of tuition and the percentage of a registered program completed at the time withdrawal, up through 50% of the program. For example, if a student completes 25% of the semester, as calculated on the official Academic Calendar published by GCU, he/she will receive a refund of 75% of tuition paid. If a student withdraws after completing more than 50% of the registered program, no refund of tuition will be issued.

Refunds will be issued for tuition and refundable fees ONLY*. Refunds will not be issued for the following:

- Application fee
- Late registration fee (per class)

- Application fee
- Late registration fee (per class)
- Institutional scholarship funds
- Graduation fees
- Returned check or declined credit card fees
- Late payment fees
- Penalty for non-payment or default payment fee

*NOTE: All monies will be refunded IF AND ONLY IF the student requests a refund within three (30) business days of signing the application paperwork, OR if no paperwork is signed and, prior to classes beginning, the student requests a refund within three (30) business days of making a payment.

A student who believes that a refund has not been calculated correctly may appeal to the Director of Business Affairs and, if need be, to the President.

Contact:
Daniel Kim, Director of Business Affairs
Phone: 678- 535-7771(#106)
Email: business@gcuniv.edu

Any student who remains dissatisfied after attempting resolution through GCU channels may file a complaint with the Georgia Nonpublic Postsecondary Education Commission:

GNPEC
2082 East Exchange Pl, Ste. 220
Tucker, GA 30084
Phone: 770-414-3300

Complaints must be filed through the GNPEC website at gnpec.georgia.gov.

ATTENDANCE POLICY

Georgia Central University requires all students to attend all their registered classes including chapel (Institutional Requirement). Any students missing more than 3 class sessions will be permanently dismissed from the class for that particular semester with a grade of "F." This attendance policy is non-negotiable and is a requirement of the United Immigration Services for international students; university officials are required to terminate any such student's J-1 visa status in any case of failure to attend classes. Three late attendances to any class will be regarded as one absence.

In case of an emergency, a student may submit an official Absence Excusal Form to the faculty member in charge of each of the courses in which the student is enrolled. This form is available at the Office of Academic Affairs and on the GCU website. This form must be completed and signed by the applicant; the decision to grant a recognized absence then relies on the faculty's judgment and on submitted documentation. If the student has official permission from the Office of Student Affairs to be absent due to an emergency situation (including injury, hardship or sickness), the student may miss the class on the stated dates and such absences will not count towards his/her attendance.

ACKNOWLEDGEMENT

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution's refund policies have been clearly explained to me.

Student Signature	Date
Institutional Representative Signature	Date

Note:
Student must receive a copy of this form, and a copy must be kept in the student's file. This form must be accompanied by a GNPEC Student Disclosure Form.