



SAINT XAVIER UNIVERSITY

CHICAGO

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ORLAND PARK

18230 Orland Parkway • Orland Park, IL 60467
Phone (708) 802-6200 • Fax (708) 802-6202

www.sxu.edu • admission@sxu.edu

Application For Undergraduate Admission

Please return this completed application with a \$25 non-refundable fee to the Office of Admission.

Part A:

Social Security Number _____ Gender M F Date of birth _____
month day year

Name _____
last/family first nickname middle maiden

Address _____

City _____ State _____ Zip code _____ Country _____

Mailing address, if different _____
street city state zip country

Home phone _____ Cell phone _____ Business phone _____
(area code) (area code) (area code)

E-mail address _____

Country of citizenship _____ Country of birth _____

Citizenship status: U.S. citizen F-1 visa student Permanent resident - Number A _____ Other visa

Date of entrance: August 20 ____ January 20 ____ I will be a: Freshman Transfer Adult (age 23 and over)
year year

Enrolling: Full time (12+ semester hours) Part time (1-11 semester hours)

Major program of study at SXU _____ Do you plan to live on campus? Yes No

Do your parent(s) (natural or adoptive) have a bachelor's degree? Yes No

I plan to apply for need-based financial aid: Yes No When did you, or will you, file the FAFSA? ____/____
month year

List your high school and include the date of graduation.

_____ high school city state graduation date

High school cumulative grade point average ____/4.0 ACT composite score _____ SAT total score _____

If you have not yet taken the ACT/SAT, when do you plan to do so? ____/____ (SXU school codes: ACT 1134, SAT 1708)

Optional responses: For statistical purposes and possible allocation of financial aid.

Ethnicity: Are you Hispanic or Latino descent? ____ Yes ____ No

In addition, select one or more of the following racial categories:

- White Black or African-American Asian American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander Non-U.S. Resident

Religion: Catholic Orthodox Protestant Jewish Islamic Other

List all colleges and universities attended and include the dates of attendance/graduation and any degrees earned.

college/university	city	state	hours	GPA
college/university	city	state	hours	GPA
college/university	city	state	hours	GPA

Current employer _____ Phone _____ Occupation _____
(area code)

Address _____
city state zip

Does your employer provide tuition reimbursement? Yes No If yes, how much? _____%

Part B: REQUIRED FOR ALL APPLICANTS:

Attach a separate sheet describing, in a typed essay, the quality of your academic performance in the past and how you plan to be successful at Saint Xavier University. How did you hear about SXU and why did you decide to apply for admission?

Part C: FOR HIGH SCHOOL STUDENTS ONLY:

Please request an official high school transcript with your ACT/SAT scores included, to be sent directly to the Office of Admission.

Name of Parent or Guardian _____

Street Address (if different than yours) _____

City _____ State _____ Zip code _____ Country _____

Parent/Guardian E-mail address _____

Would you like to receive text messages from SXU? Yes No

Part D: RECOMMENDED FOR HIGH SCHOOL STUDENTS:

Attach a separate sheet listing any academic honors, work history, and extracurricular activities, including years of participation and positions.

Part E: FOR TRANSFER AND ADULT STUDENTS ONLY:

Please request that official transcripts from each college and/or university you have attended be sent directly to the Office of Admission at SXU.

Please request an official high school transcript to be sent directly to the Office of Admission:

- a. if you plan to major in nursing or the sciences
- b. if you have earned less than 30 semester hours of college credit

Part F:

Certification: I understand that withholding information on this application or giving false information may make me ineligible for admission to Saint Xavier University or subject to dismissal. I have read this application and certify that the statements I have made are correct and complete.

Signature _____ Date _____