

# Correctional Education 2023-2024 Application for Admission for Degree-Seeking and Non-Degree-Seeking Students



**COMPLETE ALL SECTIONS.** Incomplete applications will not be processed or may be significantly delayed.

Include your signature, \$25 nonrefundable fee, and separate Consent to Release Education Records and Required Pre-enrollment Discipline and Criminal History Review forms.

## Your Information

Name \_\_\_\_\_  
Prefix (Mr., Mrs, Dr., etc.)    First    Middle Initial    Last    Suffix (Jr., III, etc.)

Previous Name (other name under which your transcripts might appear) \_\_\_\_\_  
Prefix (Mr., Mrs, Dr., etc.)    First    Middle Initial    Last    Suffix (Jr., III, etc.)

Preferred Name (nickname, if applicable) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
mm / dd / yyyy

Legal Sex  Male  Female    Social Security Number

Please verify the accuracy of your Social Security Number before submitting your application. Entering an inaccurate SSN could cause significant problems with your student record, especially if you intend to apply for need-based financial aid at OHIO. **While submission of the SSN is optional on the application for admission and scholarships, please note that students who have not supplied a Social Security Number to Ohio University cannot be considered for need-based financial aid.** If you do not wish to provide a SSN at this time but would like to be considered for financial aid at OHIO, you will need to supply official documentation of your SSN to Undergraduate Admissions in advance of your FAFSA results being sent to Ohio University.

## Corrections Information

All Ohio University students who have been convicted of a felony must complete a review process. This process is deferred for students participating through the Correctional Education program during the period of incarceration only. Correctional Education students who wish to continue enrollment after being released must submit a re-enrollment form to the Registrar's Office and complete the required felony review process through the Office of Legal Affairs. This review process will determine a student's post-release enrollment options, including on-campus, online, and/or print-based enrollment. Most Correctional Education students are able to continue enrollment through one or more of these options. However, eligibility for enrollment at Ohio University through the Correctional Education program does not guarantee eligibility for other forms of enrollment after incarceration; in extreme and rare cases, a Correctional Education student may be prohibited from continuing enrollment at OHIO after release.

What is your inmate number? \_\_\_\_\_ What is your anticipated release date? \_\_\_\_\_  
mm / dd / yyyy

Name of your current institutional or correctional facility: \_\_\_\_\_  
Institution/Facility Mailing Address    City    State/Province    Zip/Postal Code

## Applicant Status

Which type of applicant are you?  Freshman Applicant  Transfer Applicant  
(If you have not yet graduated high school but have already earned college credit, you are still considered a freshman applicant.)

Please indicate your intended major (check only one):  Associate of Applied Business  Associate of Arts: Arts and Humanities  Associate of Science  
 Associate of Individualized Studies  Associate of Arts: Social Sciences  Bachelor of Specialized Studies  Bachelor of Technical and Applied Studies  
 Undecided  Non-degree-seeking

What is your country of citizenship? \_\_\_\_\_

Do you have a current immigration status?  Yes  No

If yes, what is your current immigration status?  Asylee  Temporary Protective Status  Refugee  Deferred Action for Childhood Arrivals  
 Undocumented  Permanent Resident  Other \_\_\_\_\_

Are you an international student?  Yes  No

Are you an Ohio resident?  Yes  No    If yes, since what date have you been an Ohio resident? \_\_\_\_\_  
mm / dd / yyyy

What is your county of residence \_\_\_\_\_

Where were you born? \_\_\_\_\_  
City    State    Country

## Permanent Address

Street Address \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_  
Zip/Postal Code \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_ Address Valid Since mm / dd / yyyy

## Billing Contact Name (if different from applicant)

Name \_\_\_\_\_  
Prefix (Mr., Mrs, Dr., etc.) First Middle Initial Last Suffix (Jr., III, etc.)

## Billing Address (if different from permanent address)

Street Address \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_  
Zip/Postal Code \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_ Address Valid Since mm / dd / yyyy

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
(Area Code) Phone Number (Area Code) Phone Number

EmailAddress \_\_\_\_\_

## Ethnic Background

This information is optional and will not be used for discriminatory purposes.

Are you Hispanic or Latino?  Yes  No  
 American Indian or Alaskan Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White

## Military Status

Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training?  Yes  No  
Are you a veteran of the U.S. Armed Forces?  Yes  No

For purposes of the following questions, a veteran is defined as an individual who (1) has engaged in active duty in the U.S. Armed Forces (Air Force, Army, Coast Guard, Marines, or Navy) or is a National Guard or Reserve enlistee who was called to active duty for other than state or training purposes, or was a cadet or a midshipman at one of the service academies, and (2) was released under a condition other than dishonorable. Also answer "Yes" if these conditions do not apply now but will apply by June 30, 2023.

An individual should answer "No" if he/she (1) has never engaged in active duty in the U.S. Armed Forces, (2) is currently an ROTC student or cadet or midshipman at a service academy, (3) is a National Guard or Reserve enlistee activated only for state or training purposes, or (4) was engaged in active duty in the U.S. Armed Forces but released under dishonorable conditions.

Are you a member of the National Guard or the U.S. Armed Forces reserve?  Yes  No

Would you or your family like to receive information about Veterans Affairs educational benefits and services available through the Ohio University Veterans and Military Student Services Center?  Yes  No

## Family Information

Would you like to receive more information about resources available to students who are or have been in foster care?  Yes  No

## Parent/Guardian 1

Highest level of school this parent or guardian has completed

Less than HS Graduate  HS Graduate or Equivalent  Some College  Technical School  2-Year College Degree  Bachelor's Level Degree  
 Some Graduate School  Master's Level Degree  Doctorate (Academic)  Doctorate (Professional)  Post-Doctorate

Did this parent or guardian graduate from Ohio University?  Yes  No Graduation Year mm / dd / yyyy

Is this parent or guardian an employee of Ohio University?  Yes  No

Name \_\_\_\_\_  
Prefix (Mr., Mrs, Dr., etc.) First Middle Initial Last Suffix (Jr., III, etc.)

Street Address \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_  
Zip/Postal Code \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_

**Parent/Guardian 1** (continued)

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Type  Home  Work  Cell

Relationship  Mother  Father  Step-Father  Step-Mother  Legal Guardian

**Parent/Guardian 2**

Highest level of school this parent or guardian has completed

Less than HS Graduate  HS Graduate or Equivalent  Some College  Technical School  2-Year College Degree  Bachelor's Level Degree  
 Some Graduate School  Master's Level Degree  Doctorate (Academic)  Doctorate (Professional)  Post-Doctorate

Did this parent or guardian graduate from Ohio University?  Yes  No Graduation Year      /      /       
mm / dd / yyyy

Is this parent or guardian an employee of Ohio University?  Yes  No

Name \_\_\_\_\_  
Prefix (Mr., Mrs, Dr., etc.) First Middle Initial Last Suffix (Jr., III, etc.)

Street Address \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Type  Home  Work  Cell

Relationship  Mother  Father  Step-Father  Step-Mother  Legal Guardian

**Family Members**

Do you have family members who have attended, or are currently attending, Ohio University?  Yes  No

If yes, please attach a separate sheet listing name(s), graduation year(s), and relationship(s).

**Your Education**

High School \_\_\_\_\_ High School Type  Public  Private  Homeschool

Name \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ CEEB Code \_\_\_\_\_

Graduation Date      /      /      GED?  Yes  No      /      /      State \_\_\_\_\_  
mm / dd / yyyy mm / dd / yyyy

**College Background**

List all other institutions attended prior to enrolling at Ohio University. If you enroll at another institution after submitting this application you must notify Undergraduate Admissions of that institution. Indicate dates of attendance and degrees earned, if applicable. Attach additional sheets if necessary.

Name \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_

Beginning Date of Attendance      /      /      End Date of Attendance      /      /       
mm / dd / yyyy mm / dd / yyyy

Major Area of Study \_\_\_\_\_

Degree Earned \_\_\_\_\_ Date Degree Received/Expected      /      /       
mm / dd / yyyy

