

Littlerock University

a caring discipline of culture and edification

Application

Complete the application by providing all the information requested. Attach a cover letter explaining “why you want to attend Littlerock University” and include a check in the amount of \$25 if submitting electronically you may pay the fee by PayPal.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

e-mail: _____ Phone Number: (_____) _____

Is the above address a permanent mailing address: _____ Yes _____ No

Date of Birth: _____

Marital Status: _____ Married _____ Single

Gender: _____ Male _____ Female

1. Are you transferring credits from another school? _____ Yes _____ No

1.a. If yes – how many credits do you have to transfer? _____

2. Are you a former Littlerock University student? _____ Yes _____ No

3. Which campus? _____ or _____ Distance Learning (Internet)

4. List your prior education:

Name of High School	Location	Date of Attendance	
		From M/Yr	To M/Yr

Name of College / Other	Location	Date of Attendance	
		From M/Yr	To M/Yr

5. Prior Degrees – check all that apply:

None GED Associates Bachelorette Masters Doctorate
 High School Graduate Some College Other _____

6. Degree you are seeking:

Some classes Associates Bachelorette Masters Doctorate

7. Alternative credit you would like considered or transferred:

ACE ACT CC CDC CLEP CPA DANTES

8. Will you be seeking payment assistance? Yes No

9. Besides English what other languages do you read & write?

10. Are you a current volunteer of Littlerock University? Yes No

11. Where did you learn about Littlerock University?

12. When do you wish to begin your education? _____ Month _____ Year

13. Are you an ordained minister or senior minister? Yes No

13.a. If no provide a letter of recommendation from your senior pastor.

13.b. If yes provide a copy of the credentials.

Send the completed application to: 5235 E Southern Ave D106-425 Mesa AZ 85206 or e-mail to admissions@littlerockuniversity.org