Dear Prospective Student:

Wilmington University is pleased that you have expressed an interest in its new Doctor of Business Administration Degree Program.

The Doctor of Business Administration (DBA) Program is designed to facilitate the continuing development of the core skills and knowledge of experienced business professionals and educators. The curriculum is designed to enable students to develop a higher level of competence in the comprehension of theoretical and applied literature in a chosen business discipline and in conducting applied research. The students will develop critical knowledge and skills that are essential to business management, consulting and business education. Our faculty is carefully selected and is comprised of persons with doctorate degrees who have considerable practical experience.

We started the DBA program in January 2008 and at this time have selected two groups to start the program. We plan to start additional series of courses as we accept qualified students into the program.

When you have completed all sections of the application materials, please mail them to the Office of Graduate Admissions, Wilmington University, 31 Read’s Way, New Castle, DE 19720. The completed application must be accompanied by a non-refundable $35.00 application fee. Application packets received by the Office of Graduate Admissions will be acknowledged as they are received.

The DBA Program Admissions Committee will review the applications as they are received but not later than the deadline dates listed in the attached instruction page, and will notify candidates regarding a possible interview with the Program Admissions Committee or certain committee members.

Sincerely,

Donald W. Durandetta, Ph.D.
Director, Doctor of Business Administration

Office of Graduate Admissions
31 Read’s Way
New Castle, DE 19720
302-295-1184 Fax 302-295-1123
WILMINGTON UNIVERSITY
DOCTOR OF BUSINESS ADMINISTRATION

PLEASE BE ADVISED THAT APPLICATIONS FOR THE DOCTORAL PROGRAM WILL NOT BE CONSIDERED UNTIL ALL ADMISSION REQUIREMENTS ARE COMPLETED.

Instructions for completing the DBA Program Application and Supporting Materials:

1. Submit all official transcripts from accredited colleges, universities, or other degree granting institutions verifying completion of bachelor and master degrees. Transcripts must be official and sent to the Office of Graduate Admissions in a sealed envelope.

2. Three recommendation forms must be submitted in a sealed envelope. Applicants are responsible for entering the necessary biographical information in the recommendation forms. At least one must be from an immediate supervisor and two from professional colleagues. The immediate supervisor and professional colleagues should seal and sign the back of the envelope before submitting the recommendation to the applicant.

3. The Statement of Goals and Objectives form and current resume must be submitted.

4. A new series of DBA courses will usually start at the beginning of each of the spring, summer, and fall terms. In general, applications should be submitted at least two months prior to the start of the term for which the student is applying.

5. G.R.E./M.A.T. Test Scores are not required for Admission.

6. The completed application and any subsequent correspondence are mailed to:
   Office of Graduate Admissions
   31 Read’s Way
   New Castle, DE 19720

7. Checklist of all application items:
   _ Application for Graduate Admission
   _ Non-refundable $35.00 Application Fee
   _ Current Resume
   _ Official Bachelor Degree Transcript
   _ Official Master Degree Transcript
   _ Three Letters of Recommendation
   _ Statement of Goals and Objectives

Candidacy for the DBA degree requires the completion of 45 credit hours with a minimum a grade point of 3.0 and satisfactory performance on the comprehensive examination.
Doctor of Business Administration
Information Sessions

Wilmington University is accepting applications for the Doctor of Business Administration Program

Information sessions for prospective students will be held at the Wilson Graduate Center, New Castle, Room 324.

Please visit our website for dates and to register for a session: http://www.wilmu.edu/business/dba_start.asp

TIME LINE FOR DBA ADMISSIONS PROCESS

Applications will be evaluated as received and applicants are encouraged to submit the application materials as soon as possible.
WILMINGTON UNIVERSITY
DOCTORAL DEGREE PROGRAM

STATEMENT OF OBJECTIVES AND INTEREST
(Attach additional pages if needed)

1. What are your vocational objectives and how will your matriculation in the Wilmington University Doctor of Business Administration Program relate to them?

2. Within the field of business or business education, what are the areas of special interest to you? Please explain.

Signature:          Date:
### PART A: To be completed by applicant (Please print or type)

**NAME:**

```
LAST   FIRST   MIDDLE INITIAL
```

**SSN:** ___________________________ (optional)

**GRADUATE PROGRAM:** ____________

**DEGREE:** ______________________

**INSTRUCTIONAL SITE:**
- Wilson Graduate Center
- Dover
- New Castle
- Dover Air Force Base
- Georgetown

I understand my right under the U.S. Family Education Rights and Privacy Act of 1974 to review confidential appraisals placed in my file that are submitted with reference to admissions to a graduate or other school.

I do □ do not □ waive my right to review this recommendation.

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**SIGNATURE OF APPLICANT**

__________________________

**DATE**

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### PART B: To be completed by the evaluator

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Based on your assessment, indicate the strength of your overall endorsement by placing an “x” along the scale.

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Not Recommended  Recommended with Some Reservation  Recommended  Highly Recommended
STATEMENT: Please Complete on the applicant’s aptitudes

I. What do you consider to be the applicant's strengths?

II. Comment on any areas that need further development.

________________________________________________________________________________________________________________________________________________________

SIGNATURE ___________________________ DATE ___________________________

NAME AND POSITION (Please Print or Type)

________________________________________________________________________________________________________________________________________________________

INSTITUTION
### PART A: To be completed by applicant (Please print or type)

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I do [ ] do not [ ] waive my right to review this recommendation.

_________________________  ______________________________
SIGNATURE OF APPLICANT                      DATE

### PART B: To be completed by the evaluator

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<th>Recommended</th>
<th>Highly Recommended</th>
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</table>

(Please Complete Page 2)
STATEMENT: Please Complete on the applicant’s aptitudes

I. What do you consider to be the applicant’s strengths?

II. Comment on any areas that need further development.

____________________________________     ____________________________________
SIGNATURE         DATE

____________________________________________________________________________________________________________
NAME AND POSITION (Please Print or Type)

____________________________________________________________________________________________________________
INSTITUTION
PART A: To be completed by applicant (Please print or type)

NAME: ________________________________

LAST       FIRST                    MIDDLE INITIAL

SSN: ________________________________ (optional)

GRADUATE PROGRAM: ____________________

DEGREE: _____________________________

INSTRUCTIONAL SITE: 

___Wilson Graduate Center
___Dover Air Force Base
___Dover
___Georgetown
___New Castle

I understand my right under the U.S. Family Education Rights and Privacy Act of 1974 to review confidential appraisals placed in my file that are submitted with reference to admissions to a graduate or other school.

I do □ do not □ waive my right to review this recommendation.

_______________________________        ______________________________
SIGNATURE OF APPLICANT                      DATE

PART B: To be completed by the evaluator

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<th>Outstanding Next 10%</th>
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□ __________________________________________________________________________

Not Recommended         Recommended with Some Reservation       Recommended       Highly Recommended

(Please Complete Page 2)
**STATEMENT:** Please Complete on the applicant’s aptitudes

I. What do you consider to be the applicant’s strengths?

II. Comment on any areas that need further development.

____________________________________     ____________________________________
 SIGNATURE         DATE

____________________________________________________________________________________________________________
 NAME AND POSITION (Please Print or Type)
____________________________________________________________________________________________________________
 INSTITUTION
WILMINGTON UNIVERSITY

APPLICATION FOR GRADUATE ADMISSION

Wilmington University is fully accredited by the Middle States Association of Colleges and Secondary Schools. Wilmington University admits students of any race, creed, and national or ethnic origin. Return this application with a check made payable to Wilmington University for the non-refundable application fee of $35.00. Information for all sites concerning campus security programs, recommended personal safety practices, the authority of college Public Safety Officers, campus disciplinary procedures, and campus crime statistics for the most recent three year period can be found online at www.wilmu.edu/security or may be requested from the Wilmington University Office of Public Safety at (302) 356-6921.

ADMISsIONS INFORMATION

Today's Date:

Expected Entrance Term: ☐ Fall I ☐ Fall II ☐ Spring I ☐ Spring II ☐ Summer I ☐ Summer II

Expected Entrance Year: ☐ 2008 ☐ 2009 ☐ 2010

Social Security Number:

Name: (First) (Middle) (Last/Family)

Home Telephone 1: (      ) Cell Telephone 2: (      ) Email Address:

Address: Number and Street Apartment No.

City: State: Zip Code:

Other name which may appear on transcripts:

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, please attach a description outlining the type of offense, the circumstances of the offense, and the date you were convicted.

SELECT ONE PROGRAM OF STUDY:

☐ Non-Degree

ONLINE DEGREE PROGRAMS

☐ Administration of Justice
☐ Business Administration (MBA)
☐ Information Systems Technologies

DIVISION OF BEHAVIORAL SCIENCE

MASTER OF SCIENCE

☐ Administration of Human Services
☐ Administration of Justice
☐ Administration of Justice: Leadership & Administration
☐ Administration of Justice: Criminal Behavior
☐ Administration of Justice: Homeland Security
☐ Community Counseling

POST-MASTER CERTIFICATES

☐ Child and Family Counseling
☐ Homeland Security
☐ Mental Health Counseling

DIVISION OF BUSINESS

MASTER OF BUSINESS ADMINISTRATION

☐ MBA
☐ MBA: Finance
☐ MBA: Health Care Administration
☐ MBA: Homeland Security
☐ MBA: Management Information Systems
☐ MBA: Marketing Management
☐ MBA: Transportation & Business Logistics

MASTER OF SCIENCE

☐ Management
☐ Management: Health Care Administration
☐ Management: Homeland Security
☐ Management: Human Resource Management
☐ Management: Public Administration
☐ Management: Transportation & Business Logistics
☐ Organizational Leadership

DOCTOR OF BUSINESS ADMINISTRATION

☐ Business Administration

CERTIFICATE OF ADVANCED STUDY

☐ Finance
☐ Management Information Systems

DIVISION OF EDUCATION

MASTER OF ARTS IN TEACHING

☐ Secondary Teaching: Grades 7-12
☐ Secondary Teaching: Grades 7-12 (Non-Certified)
☐ Pre-Secondary Teaching: Grades 7-12

MASTER OF EDUCATION

☐ Applied Technology in Education
☐ Career & Technical Education
☐ Elementary Education: Grades K-6
☐ Elementary Studies (Non-Certified)
☐ Elementary Special Education
☐ Elementary Special Education (Non-Certified)
☐ Elementary Special Education (Administrative)
☐ ESOL Literacy
☐ Instruction: Gifted & Talented
☐ Instruction: Teaching & Learning
☐ Reading
☐ School Counseling (Elementary & Secondary)
☐ School Counseling (Non-Certified)
☐ School Leadership
☐ Course of Study in Education

CERTIFICATE OF ADVANCED STUDY

☐ Applied Technology in Education
☐ Economics for Educators
☐ Gifted & Talented Education
☐ Reading

DOCTOR OF EDUCATION

EDUCATIONAL INNOVATION AND LEADERSHIP

☐ Educational Leadership (P-12)
☐ Organizational Leadership

DIVISION OF INFORMATION TECHNOLOGY AND ADVANCED COMMUNICATIONS

MASTER OF SCIENCE

Information Systems Technologies
☐ Corporate Training Skills
☐ Information Assurance
☐ Internet & Web Page Design
☐ Management & Information Systems

DIVISION OF NURSING

RN License #___________ exp. ______

MASTER OF SCIENCE IN NURSING

☐ Adult/Gerontology Nurse Practitioner
☐ Family Nurse Practitioner
☐ Nursing Leadership
☐ Nursing Leadership: Educator Track
☐ Nursing Leadership: Executive Practice Track
☐ Nursing Leadership: Legal Nurse Consultant

POST-MASTER CERTIFICATE

☐ Adult Nurse Practitioner
☐ Family Nurse Practitioner
☐ Gerontology Nurse Practitioner
☐ Legal Nurse Consultant
☐ Nursing Educator
☐ Nursing Executive

DUAL DEGREE MSN

☐ Leadership: MSN & MS in Management in Health Care Administration
☐ Leadership: MSN & MBA in Health Care Management
☐ Leadership: MSN & MS in Organizational Leadership
**Admissions Information (continued)**

Initial Status:  
- New Student
- Transfer
- Return After One Year
- Re-Entry (Graduated Once)
- Continuing Education

Enrollment Type:  
- Full-Time
- Part-Time

Previously Applied:  
- Yes
- No

Previously Attended:  
- Yes
- No

Access Campus:  
- New Castle (Wilson Graduate Center)
- Dover
- Dover Air Force Base
- Georgetown

Attendance Type:  
- Day
- Evening
- Day and Evening
- Other

**Demographics (please complete the following)**

Date of Birth (mo/day/yr): _____________________

Gender:  
- Male
- Female

Marital Status:  
- Single
- Married

Veteran Status:  
- Yes
- No

Employment Status:  
- Full-Time
- Part-Time
- Self-Employed
- Unemployed
- Other

Ethnicity (optional):  
- Hispanic
- Nonresident Alien
- Hispanics of any race
- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Two or more races

Are you a citizen of the United States?  
- Yes
- No

If No, complete the information below.

Residency Status:  
- Permanent Resident (submit copy)
- Green Card Holder (submit copy)

All International Students must comply with the Bureau of Citizenship and Immigration Services regulations. Please contact the International Student Contact at the Wilson Graduate Center for a complete listing of all materials required for International Student Admissions.

Country of Citizenship: ___________________________________

Country of Birth: _______________________________________

Overseas Address: ___________________________________________________________________________________

Will you require an F-1 visa to study at Wilmington University? 
- Yes
- No

Are you transferring from another college in the United States? 
- Yes
- No

What type of visa do you have?  
- F-1 (Student in Academic Program)
- H-4 (Spouse or Child of H-1)
- R-1 (Religious Worker)
- F-2 (Spouse or Child of F-1)
- A-1 (Ambassador Diplomat or Immediate Family)
- R-2 (Spouse or Child of R-1)
- J-1 (Exchange Student)
- A-2 (Foreign Government Official or Immediate Family)
- Other__________ (specify type)
- H-1 (Temporary Worker)
- B-2 (Business Visitor)

**Previous Academic Information**

List all colleges/universities previously attended. List undergraduate experience first, then graduate. Please list professional schools and certifications last. Please have official transcripts from all institutions listed below forwarded directly from the school to Wilmington University.

<table>
<thead>
<tr>
<th>Institution</th>
<th>City/State</th>
<th>Dates Attended</th>
<th>Credits Earned</th>
<th>Degree Earned</th>
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Academic Awards:

Do you plan to apply for Financial Aid?  
- Yes
- No

If yes, contact Student Financial Services at (302) 356-4636 for Financial Aid support and planning.
## Contact and Employer Information

**Emergency Contact Person:** ____________________
**Phone Number:** (______)______

1. **(Current Employer)**
   - **Company Name:** ____________________
   - **Telephone:** ____________________
   - **Address:** ____________________
   - **Position Held:** ____________________
   - **From:** ____________________
   - **To:** ____________________
   - **Description of Duties:** ____________________

2. ____________________
   - **Company Name:** ____________________
   - **Telephone:** ____________________
   - **Address:** ____________________
   - **Position Held:** ____________________
   - **From:** ____________________
   - **To:** ____________________
   - **Description of Duties:** ____________________

3. ____________________
   - **Company Name:** ____________________
   - **Telephone:** ____________________
   - **Address:** ____________________
   - **Position Held:** ____________________
   - **From:** ____________________
   - **To:** ____________________
   - **Description of Duties:** ____________________

## Academic & Professional References

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## Statement of Goals & Objectives

Applicants for the Doctor of Business Administration, Doctor of Education, M.S. in Community Counseling, M.S. in Administration of Justice, M.S. in Human Services, and M.S. in Organizational Leadership programs should refer to the program specific application packet for a preformatted form and follow the instructions provided.

**All other graduate applicants:** Why have you decided to enter the Graduate Program at this time?
New Graduate Student Survey

Wilmington University wants to help you achieve your educational goals. Your answers to this survey will assist us in understanding our students and their needs and will be kept confidential.

What is the highest level of education attained by your mother and/or father?
- High School Diploma/GED
- Bachelor’s Degree
- Doctorate Degree
- Some College
- Master’s Degree
- Not Applicable

How many hours per week do you plan to work while attending Wilmington University?
- None
- 1-10
- 11-20
- 21-30
- 31-40
- 41 or more

Of all the colleges you considered for graduate study, would you describe Wilmington University as your:
- 1st choice
- 2nd choice
- 3rd choice
- 4th choice or lower

Thank you for taking the time to complete this survey.

How do you plan on funding your education at Wilmington University? (Check all that apply.)
- Parents/family
- Employment
- Employer tuition remission
- Personal Savings
- Scholarships
- Spouse’s Income
- Student Loans (Perkins, Federal Direct, etc.)
- Social Security Benefits
- Other Loans
- Veteran’s Benefits

Which of the following factors influenced your decision to apply to Wilmington University? (Check all that apply.)
- Academic reputation of the University
- Cost
- Availability of my major
- Availability of financial aid
- Location
- Advice of parents or relatives
- Size
- Advice of high school counselors or teachers
- Open admissions
- Contact with University representatives
- Advice of someone who attends (or attended) the University
Admission Checklist

1. Complete the Wilmington University Application for Graduate Admission, including statement of goals, and submit it with the required, non-refundable $35.00 application fee.

2. Have official transcripts from all previously attended institutions of higher education sent directly from the previous institutions to the Graduate Admissions Office at Wilmington University’s Wilson Graduate Center.

3. Applicants for the Doctor of Business Administration, Doctor of Education, M.S. in Community Counseling, M.S. in Administration of Justice, M.S. in Human Services, M.S. in Organizational Leadership, and M.S. in Nursing programs must submit recommendations before consideration for admission.

4. Interview or attend a Program Planning Conference with a Graduate Admissions Associate or Faculty Coordinator.

5. Complete a writing sample, as defined by the appropriate academic department.

6. Send application materials to:

   Wilmington University
   Office of Graduate Admissions
   31 Read’s Way
   New Castle, DE 19720
   (302) 356-INFO (4636)

I understand that in the course of my association with Wilmington University, I will be given the opportunity to participate in many college activities, including practicum, internships, field trips and special events. I hereby agree to assume all risks of injury, loss or damage to my person or property, while engaged in the aforementioned activities or in going to or returning from same.

I understand that Wilmington University has the authority to withdraw my privilege of admission, enrollment, and/or graduation for academic, disciplinary, legal or other reasons deemed sufficient.

I understand that inappropriate, harmful, and/or illegal activity is not permitted on the premises of Wilmington University. I give Wilmington University permission to define such behavior. Such behavior will be addressed at the discretion of Wilmington University and, if deemed necessary, be reported to legal authorities, employers, and/or professional organizations. I understand that this type of behavior may result in immediate expulsion.

In accordance with the Family Educational Rights and Privacy Act, students have the following rights: 1) Right to inspect and review student’s record; 2) Right to seek amendments to record; 3) Right to consent to disclosure; and 4) Right to file a complaint. These four rights are fully defined in the University catalog and/or on the University website.

Wilmington University is authorized to disclose student information without consent when information is designated as “Directory Information” in the following situations: to school officials with legitimate educational interest; to an alleged victim of a crime of violence; to officials of another institution where students seek to enroll; when Comptroller General of the United States, Secretary of Education, and/or state or local educational authorities request student information; in connection with financial aid for which student has applied; to accrediting agencies; to comply with judicial order or subpoena; and in connection with a health or safety emergency. For a complete list of the items that are considered "Directory Information" please consult the University catalog or the University website.

We, the signatories to this application, understand the financial obligations associated with the admission to and enrollment in Wilmington University and assume responsibility for full payment of all fees. We understand the University’s withdrawal and refunds policy.

I have enclosed the required non-refundable admission fee of $35.00.

I agree and authorize Wilmington University to publish, for public relations purposes, any photograph(s) in which I appear.

I agree that all of the information provided above has been answered fully and correctly. Omission or falsification of information may be grounds for dismissal.

Date

Applicant’s Signature Parent/Guardian Signature (if applicant is a minor)

For additional information you may use the University’s Toll-Free number, 1-877-967-5464 or visit the website at www.wilmu.edu