



1858

# BAKER UNIVERSITY

SCHOOL OF PROFESSIONAL AND GRADUATE STUDIES

8001 College, Suite 100, Overland Park, KS 66210  
913-491-4432 • fax 913-491-0470

## ENROLLMENT FORM

**Legal Name:** \_\_\_\_\_

Last

First

Middle

Maiden or Other

**Address:** \_\_\_\_\_

Street

City

State

Zip

**Phone Numbers:** \_\_\_\_\_

( )

Home

( )

Work or Other

**Email Address:** \_\_\_\_\_

**SSN:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Birth date:** \_\_\_\_\_

**Check One:**

Male

Female

**Ethnicity – Check one:**

African American

American Indian/Alaskan Native

Asian/Pacific Islander

Hispanic

Caucasian

U.S. Citizen:

Yes

No\*

If no, what is country of citizenship? \_\_\_\_\_

If no, please attach a copy of your visa. \_\_\_\_\_

### Educational Background

High school graduate or GED?

Yes

No\*

Name of high school: \_\_\_\_\_

*\* If you do not have a high school diploma or GED, we cannot document credit for courses.*

Undergraduate Study (Please list all postsecondary institutions attended and degrees earned.)

Name of Institution	Location	Dates Attended	Degree	Credit Hours

*Continued on Reverse Side*

