

# Trinity Christian University

## Application for Admission

3723 Airline Drive – Metairie, LA 70001

(504) 228-3328 – (504) 328-2204

Please type or print clearly:

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Sex: Male \_\_\_ Female \_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone : (\_\_\_\_) \_\_\_\_\_ Daytime (\_\_\_\_) \_\_\_\_\_ Evening

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Instructions: The person whose name appears above is applying for admission to Trinity Christian University. Your assessment of the applicant will serve as valuable information to TCU Admissions Committee. The Admission Committee and the applicant greatly appreciate the time and effort required to provide this information. Please mail this to the above address of fax it to (504) 328-2204

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### Please check the appropriate Counseling:

Pastoral Counseling

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Married  Single  Divorced  Widow Military Service? \_\_\_\_\_

Date of Service: \_\_\_\_\_ Active Reserve:  Yes  No

Are you an "active" member in church?  Yes  No

Do you serve in any church?  Yes  No

If yes, what is your position? \_\_\_\_\_

Name of Church: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_

Pastor's Phone: \_\_\_\_\_ Church Phone: \_\_\_\_\_

### Academic History:

Name of High School: \_\_\_\_\_ City Located: \_\_\_\_\_

Did you graduate?  Yes  No Received GED?  Yes  No

College or Technical School attended: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Minor: \_\_\_\_\_ Major: \_\_\_\_\_