

Insert  
Photo  
Here



**Return Completed Application To:**  
Cherub College  
Office of Admissions and Recruitment  
3<sup>rd</sup> Floor, Gold Circle House, East Bay Street  
P.O. Box SP-64063  
Nassau, N.P., The Bahamas

# APPLICATION FOR ADMISSION

Date of Application: \_\_\_\_/\_\_\_\_/20\_\_\_\_  
Day Month Year

**I plan to enroll in:**  Fall  Spring  Summer Year of 20\_\_\_\_ **Applying as:**  Freshman  Transfer  Returning

## 1. Personal Information

**Legal Name:** \_\_\_\_\_  
Last First Middle Maiden

**Gender:**  Male  Female **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Citizenship:** \_\_\_\_\_  
Day Month Year

**National Insurance Board #:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_  
Number Street

City Island P.O. Box Country

**Telephone:** (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Work) \_\_\_\_\_

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

**Place of Employment (if any):** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

## 2. Programme of Study Applying For *(please tick applicable box below)*

### School of Communications

B.Sc. in Communications

### School of Social Science

B.Sc. in Public Administration

B.Sc. in Psychology

B.Sc. in Social Work

### School of Business and Administration

B.Sc. in Business Administration

B.Sc. in Marketing

B.Sc. in Finance

B.Sc. in Human Resource Management

B.Sc. in Computer Information Systems

B.Sc. in Accounting

B.Sc. in Tourism and Hospitality Management

### School of Education

B.Ed. in Social Science Education with a concentration in History

B.Ed. in Early Childhood Education

B.Ed. in Primary Education

## 3. Responsible Party for Payment of Tuition and Fees

**Name/Company:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

#### 4. Educational History

In chronological order, list all previous schools, colleges, and universities attended. If applying for a graduate programme, list only institutions where you received college credits. If more space is needed, continue on a separate sheet of paper. *Official transcripts from all institutions attended should be sent to the Office of Admissions directly from the institution.*

INSTITUTION NAME	COUNTRY	DATES ATTENDED	QUALIFICATION/CREDITS RECEIVED
1.		From: To:	
2.		From: To:	
3.		From: To:	

List all exams passed and their subjects/levels. Include certified copies or score reports. *Original certificates will only be returned if a pre-labeled return envelope is provided. If not, it becomes part of the permanent file.*

BGCSE SUBJECT	GRADE

SAT REASONING	SCORE
VERBAL	
MATHEMATICS	

SAT SUBJECT TEST	SCORE

CXC/CAPE/GCE	LEVEL

Have you ever been dismissed from any institution for any reason?  YES  NO  
*If yes, please briefly explain the circumstances surrounding the dismissal.*

---



---



---



---

#### 4. Checklist

In order for the Admissions Team to consider your application, please ensure you have included the following to prevent any delays:

- |  |  |
|--|--|
| <input type="checkbox"/> Completed Application for Admission   | <input type="checkbox"/> High School Transcript and High School Diploma                  |
| <input type="checkbox"/> Application Fee<br>\$85.00 ( <i>Bahamian Students</i> )<br>\$150.00 ( <i>International Students</i> ) | <input type="checkbox"/> Official Transcripts from all Colleges or Universities attended |
| <input type="checkbox"/> Transcript Evaluation Fee for any college transcripts submitted (\$50.00 per transcript)              | <input type="checkbox"/> Copies of all degrees earned                                    |
| <input type="checkbox"/> Copy of Passport Data Page  | <input type="checkbox"/> 2 Reference Letters   |
| <input type="checkbox"/> Copy of NIB Card  | <input type="checkbox"/> BGCSE Examination Test Scores/Certificates                      |
| <input type="checkbox"/> Copy of Residency Card ( <i>Non-Bahamians</i> )   | <input type="checkbox"/> 2 Passport-sized Photographs                                    |
|  | <input type="checkbox"/> Enrollment Agreement ( <i>due upon acceptance</i> )             |
|  | <input type="checkbox"/> Medical Form ( <i>due upon acceptance</i> )                     |

#### 5. Declaration

I certify that the information I have provided in this application is complete and correct to the best of my knowledge. I understand that any misrepresentation may result in my expulsion from the programme. I acknowledge that the terms and conditions contained in the Cherub College Catalogue constitute part of my agreement with the college including sections concerning responsibility, health, refunds, changes in dates, courses and billing. I understand that all documents submitted in support of my application for admission to the college will not be returned and will remain a part of my permanent file. I understand that the fee charged to process my admission application is non-refundable in any circumstances. If admitted to the college, I agree to comply with the regulations governing students.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

.....  
**Do Not Write In This Space – College Official Use Only**

- |   |                                  |
|---|----------------------------------|
| <input type="checkbox"/> Accepted               | ID# Assigned: _____              |
| <input type="checkbox"/> Conditional Acceptance |                                  |
| <input type="checkbox"/> Rejected               | Application Fee Receipt #: _____ |

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Senior Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_