

Applying to Shiloh University – Personal Enrichment

To complete the admissions application form, follow these steps:

1. **Application:** Complete the Personal Enrichment Application on the following two pages, then save a copy to your computer. Please go to **Using PDF Forms** for additional instructions if needed.
2. **Personal Statement:** Write a brief statement about your Christian experience and what you hope to gain from taking Shiloh University personal enrichment courses (Page 2 of the application).
3. Mail your original signed application to **Admissions, Shiloh University, 100 Shiloh Drive, Kalona, IA 52247**. Please also e-mail it to admissions@shilohuniversity.edu to begin processing of your application.

You will be notified regarding acceptance, and if admitted, you will receive instructions on registering for classes.

Statement of Faith

Shiloh University is a Christian school, and all courses are taught from this perspective. Students must respect the beliefs and teachings of the school, may not take any actions contrary to these beliefs and teachings while enrolled in the school, and must otherwise obey the rules of the school. Refer to the **Statement of Faith** on the website for more information.

Accreditation Statement

Shiloh University and its degree programs are nationally accredited by the Accrediting Commission of the Distance Education and Training Council. However courses taken for Personal Enrichment are not accredited, nor will credit earned be transferable to other institutions.

Study Time

We want you to have a quality, impactful, and fun experience taking courses with Shiloh University. But please take into consideration that these are college/seminary level courses and will require a weekly commitment of time and study. The amount of time you put into your studies will determine how much you get out of the experience. Generally, one 3-unit course requires 6 to 8 hours of study per week for Personal Enrichment students.

Thank you for considering the Personal Enrichment program at Shiloh University!



SHILOH UNIVERSITY

PERSONAL ENRICHMENT APPLICATION

100 Shiloh Drive
Kalona, IA 52247
(319) 656-2447 – Phone
(319) 656-2448 – Fax
admissions@shilohuniversity.edu

Date of Application (mm/dd/yyyy) _____

I request admission for: _____
Term Year

BIOGRAPHICAL INFORMATION

Legal name

Last name First name Middle name Former last name

Mailing address Shipping address

Street Street

City State Postal code Country City State Postal code Country

Social Security number _____ - _____ - _____ Home phone _____

Date of birth (mm/dd/yyyy) _____ Cell phone _____

E-mail _____ Work phone _____

Country of citizenship _____ If not a U.S. citizen, are you a permanent U.S. resident? Yes No

Language 1 _____ Language 2 _____ Marital status Single Married

EDUCATIONAL BACKGROUND

List high school, college, seminary, or graduate school education. If currently enrolled, include expected date of graduation and expected degree. Please also include GED or GRE tests you have taken.

Degree	Date (mm/yyyy)	Institution	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Any other education-related information _____

CHURCH AND MINISTRY

Are you a Living Word Fellowship or affiliated church member? Yes No Length of membership _____

Name of your church _____

Church address _____

Church phone _____ Name of pastor _____

Are you ordained? Yes No By what organization? _____

Date of ordination (mm/yyyy) _____

PERSONAL STATEMENT

Please type a brief response to the prompt below. This can be handwritten or typed. It does not need to be longer than the space provided below, although you can attach an additional page if you wish.

Describe your Christian experience and what you hope to gain from taking Personal Enrichment courses with us.

ACKNOWLEDGEMENTS

Statement of faith

I have read and agree with the statement of faith.

I have read and do not agree with the statement of faith. I have enclosed a written explanation of where and why I disagree.

Respecting the beliefs and teachings of the school

I will respect the beliefs and teachings of the school and agree not to take action against the beliefs of the school while I am enrolled.

By signing below, I hereby witness that the information I have provided in this application is accurate and not misleading.

Signature of applicant

Date

Please mail your signed original application to the address below. Also e-mail a PDF version of the application to the email address below to begin processing.

Shiloh University admits qualified students without regard to race, color, gender, national or ethnic origin, age, marital status, or disability. See Family Educational Rights and Privacy Act statement on Web site regarding confidentiality of student information.

Admissions www.shilohuniversity.edu
Shiloh University Phone: (319) 656-2447
100 Shiloh Drive Fax: (319) 656-2448
Kalona IA, 52247 E-mail: admissions@shilohuniversity.edu