



2015 Admissions Application

USE THIS FORM:

For new students or to update any of your data when you register for graduate courses in the future.

COMPLETE AND RETURN THIS FORM

- Complete and mail or fax this form, with your required admission fee payment to:
 The American College
 Attn: Elaine Gulezian
 270 S. Bryn Mawr Avenue,
 Bryn Mawr, PA 19010-2196
 Fax: 610-526-1400

PRIVACY POLICY

- The American College respects the right to privacy of its students and is committed to safeguarding the personal information of each student. Please visit our website, TheAmericanCollege.edu to view the full policy.

YOUR KEY DATA (please print)

Legal Name: _____
Last First Middle Initial

SSN: _____

Birth Date: _____ Gender: Male Female

I am a new student

I have previously enrolled My student number is

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Your number may have fewer digits

BUSINESS ADDRESS (UPS cannot deliver to a PO box) Preferred for Shipping Preferred for Mail

Company Name/Affiliation: _____

Street: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Business Phone Number: _____

Cell Number: _____

Preferred E-Mail Address: _____
(required)

HOME ADDRESS (UPS cannot deliver to a PO box) Preferred for Shipping Preferred for Mail

Street: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

REQUIRED COURSES

- GS 839 Planning for Impact in the Context of Family Wealth
- GS 849 Charitable Giving Strategies
- GS 859 Gift Planning in a Nonprofit Context

EXAM PERIODS (check one)*

Jan-Mar Apr-Jun Jul-Sep Oct-Dec

* The American College courses have exam testing periods to ensure that your examination reflects the study materials you receive.

Do you need Continuing Education for your course? Yes No If yes, what is your state of licensure and your license number?

State: _____ License Number: | | | | | | | | | | | | | | | | | | | | | |

FEES (per course)

Admission Fee (New Students Only) (\$150) \$ _____

Course Tuition (\$1,500) \$ _____

Or Non-Profit (\$1,100) \$ _____

Shipping and Handling (\$25) \$ _____

CAP Package Pricing (all inclusive)

For Profit (\$3199) \$ _____

Non-Profit (\$2800) \$ _____

Total \$ _____

METHOD OF PAYMENT

Check: (make check payable to The American College)

Charge: VISA MC AmEX Discover

Account No.

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Expires:

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Signature: _____ Date: _____