



College/University Name (1) Country:

Graduated Date: (DD/MM/YY)

Certificate/Diploma/Degree.

Major:

Credits Earned:

College/University Name (2)

Country:

Graduated Date: (DD/MM/YY)

Certificate/Diploma/Degree.

Major:

Credits Earned:

Official indicates a transcript that is sent by the school or institution directly to Delaware City University.

**Required Documentation:** A copy of your high school diploma or equivalent proof of graduation must be submitted.

### Programs of Study:

High Professional Program.  
(Choose only one)

Colleges (Choose only one)

Required Major

Certifications, and Training

Name of Certificate, License, or Training Program

**Please list additional Professional Licenses, Professional Experience, Certifications, and Training Programs on a separate paper.**

Where did you hear about the Delaware City University?

Internet

Family/Friend

Marketing Promotion

Other

I certify that to the best of my knowledge the information provided in this application is accurate and complete. I understand that if this information or any other information upon which my admission is based is found to be inaccurate or incomplete, the university may rescind my certificate. If I am approved for admission and decide to enroll at Delaware City University, I agree to abide by the rules and regulations of the University. I acknowledge that all forms, transcripts, and other required documents submitted to Delaware City University will become the property of the University and will not be forwarded to another institution or returned to me.

Applicant Signature:

Date: (DD/MM/YY)

Please forward your completed application and all necessary documents to: DCU admissions department.  
[admissions@dcu-edu.org](mailto:admissions@dcu-edu.org)