

Application for Diversity Scholars Program November 7-10, 2019

Name:				
Last:		First:	Former:	
Preferred G	Gender Pronouns:			
Permanent	t Address:			
Street:		City:	State:	Zip:
Present Ad	dress (if different):			
Street:		City:	State:	Zip:
Birthday: _	//			
Phone (Day	<i>]</i> :	Email:		
Major: Anticipated	University: I Graduation Date: cribe any specific areas of inte	Minor:		
Do you req	uire any special accommodatio	ons? O Yes O No		
Ethnicity:	O African American/Black	O Asian/Pacific Islander	O American Indian/Alaskan Native	
	O Hispanic/Latino	O White, Non Hispanic	O Other	
 This ap An upd Recomacader Essay to world 	ON CHECKLIST FOR ADLER DI oplication, signed and dated lated copy of your resume or Co mendation – Please provide or nic potential. – Please submit a statement (5 king with underrepresented po of your Official Transcripts	urriculum Vitae (CV) ne letter of recommendation 00 words maximum) describ	from an individual who can sp	beak about your
	ation I present in this application e will not be valid if information			l understand that any

If I am admitted into Adler University's Diversity Scholars Program, I permit Adler University to release this information.

O Yes O No

O By checking this box, I certify that the information I submit in this application is complete and accurate to the best of my knowledge. I understand that this application is not valid if information is withheld or misrepresented.

To be considered for the Adler University Diversity Scholars Program, please fill out the following application and mail it to:

Adler University ATTN: Office of Admissions, Diversity Scholars Program 17 North Dearborn Street Chicago, IL 60602