ENROLLMENT APPLICATION FORM

Application ID: LU\_2934 Submitted Date: August 16, 2022

### **Student Information**

First Name		Last Name					
GURKIRAT SINGH Date of Birth July 10, 2002 City of Birth JHAKHAR WALA PUNJAB		DHILLON Gender Male Country of Birth India					
				Country of Citizenship			
				India			
				Mailing Address NEAR RAN SINGH WALA ROAD VPO JHAKHA	R WALA		
				City	State/Province		Zip/Postal
FARIDKOT	PUNJAB		151208				
Country							
India							
Home Country Address (if different th	nan above)						
City	State/Province		Zip/Postal				
Country							
Social Security Number (If you have c	one)						
Phone		Email					
919781329946		gurkiratsinghdhille	on75@gmail.com				

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### **Emergency Contact**

First Name		Last Name	
KEWAL SINGH		DHILLON	
Relationship			
FATHER			
Address			
NEAR RAN SINGH WALA ROAD VPO JHAKH	AR WALA		
City	State/Province		Zip/Postal
FARIDKOT	PUNJAB		151208
Country			
Phone		Email	

### **Demographic Information**

Universities that are recipients of federal dollars are required by the Federal government to solicit certain demographic information to meet federal reporting requirements. Applications are requested to provide the following information voluntarily. This information will not be utilized in a discriminatory manner.

#### Please indicate how you identify yourself:

Asian or Pacific Islander

#### **Applicant Status**

International student

#### Are you a veteran of the U.S. Military?

#### Are you a transfer in student?

No

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## **Application Documents**

#### Select a program

Bachelor of Arts in Business Administration

#### Please choose the program format

On-Campus

Distance Education

Please Select Starting Cohort

#### Please Select starting semester

Spring 2023

Please submit the following documents.

All documents must be accompanied by notarized English translation, if submitted in language other than English.

#### High School Diploma and Transcripts

ACADMICS-4.pdf

#### Transcripts from Higher Educational Institutions Attended

ACADMICS-5.pdf

Two Letters of Recommendation

Three Letters of Recommendation

Resume with Summary of all Work, Extracurricular Activities, and Education History

CV-14.pdf

Photocopy of Passport or Equivalent

Passport-51.pdf

Copy of US Visa

Copy of current I-94

Proof of English

MOI-6.pdf

Copy of current I-20

Official transcript from the school in the USA

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#### One-page Essay Explaining Applicant's Interest in a Lincoln University Program

Essay-5.pdf

Application statement

Recruiter

### **Applicant's Declaration of Finances**

All international applicants are required to complete this form and provide financial support documents to demonstrate their ability to pay all tution, fees, and living expenses for the first year of the academic program. An applicant or a sponsor must submit a bank statement or a verification letter from an officer of the bank or other financial institution giving the present balance, which must equal or exceed the amount required for one year of study (\$20,065).

Who will pay for your educational expenses at Lincoln University?

Myself

) Sponsor

The funds for my educational expenses are on deposit in a bank or in a financial institution allowing me to use them for my educational purposes. (please choose one)

Source of Funds

- Bank: Please upload below a bank statement verifying that these funds are deposited in bank on my name and available for my educational use.
- Financial Institution: Please upload below a letter/statement verifying that the funds will be made available for my educational use in the U.S.A.

Name of Bank/Financial Institution

Please upload a bank statement of financial institution letter/statement

Financial-2.pdf

## **Sponsor's Information**

First Name

SWARAN

Last Name

SINGH

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#### Sponsor's relationship to Student

UNCLE		
Sponsor's Country of Citiz	enship	
India		
Sponsor's Address		
DWARKA		
City	State/Province	Zip/Postal
NEW DELHI	NEW DELHI	
Country		
India		
Sponsor's Phone		
Sponsor's Email		

## Agreement

I agree that I am bound by the Lincoln University's regulations concerning application deadlines and admission requirements. I agree to the release of any transcripts and test scores to this institution. I certify that this information is complete and accurate. I understand that making false or fraudulent statements within this application or residency statement will result in disciplinary action, denial of admission and invalidation of credit or degrees earned. If admitted, I agree to abide by the policies, rule, and regulations of Lincoln University. Should any information change prior to my entry into the University, I will notify the Office of Admissions.

I understand that my application will not be processed without submitted application fee. I understand that the application fee I submit with this application is a non-refundable fee.

Do you understand and agree to the terms listed above?

Yes, I understand and agree to the terms listed above.

Signature

GURKIRAT SINGH DHILLON

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## Payment

**Total Application Fee** 

\$95.00

If you need to pay by **WIRE**, please contact the admissions office at **+1-510-628-8010** or email at **wire@lincolnuca.edu. Wire Transfer Details can be found HERE** 

## Thank You

Thank you for successfully applying to Lincoln University. The application will be processed on the basis of first come first serve basis.

If you needed to contact admissions office, please do not hesitate to contact via email at admissions@lincolnuca.edu or phone at +1-510-628-8010.

For technical help, please contact us at helpdesk@lincolnuca.edu or call at 510-628-8020. For More information about the university, please visit www.lincolnuca.edu



# **PAYMENT FORM**

Receipt Number	NPF-A5VTB4PTZQ	
Date	Thursday, August 18, 2022	
Name	GURKIRAT SINGH DHILLON	
Email	gurkiratsinghdhillon75@gmail.com	
Date of Birth	Wednesday, July 10, 2002	
Fee:	Application Fee \$50	

### **Payment Information**

#### Total:

Total

Payer Information	Transaction ID
GURJANT SINGH gurkiratsinghdhillon75@gmail.com	41M40192RC142964X
(Amount: 50.00 USD)	

\$50.00