



**APPLICATION FOR ADMISSION  
DOCTOR OF BUSINESS ADMINISTRATION**

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**APPLICANT INFORMATION**

Ms.  
 Mr

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

E-Mail \_\_\_\_\_ Marital Status \_\_\_\_\_

Telephone: Business (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Best Contact Time \_\_\_\_\_

Present Employer \_\_\_\_\_ Position \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is your employer a CSU Learning Partner?  Yes  No  
 (Students employed by Learning Partners are eligible for a 10% tuition discount.)

Through what source did you learn of Columbia Southern University? \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

S.S. # \_\_\_\_-\_\_\_\_-\_\_\_\_

Sex (circle one) M F

Date of Birth:  
\_\_\_\_/\_\_\_\_/\_\_\_\_

**PREVIOUS EDUCATION**

Please attach a copy of the transcripts from all colleges and universities you have attended. Legible copies of transcripts will suffice for evaluative purposes. Please provide both front and back page of transcripts if possible. If you do not have a copy of a transcript, please contact the Registrar's Office at the college or university you attended and have an official transcript sent to the Registrar's Office at CSU for our evaluation. An official copy of all transcripts must be submitted to CSU within 60 days after you enroll.

College/University Name	Date Graduated	Degree Earned	Major	Credits Earned

**RESUME OF PROFESSIONAL WORK EXPERIENCE**

Please provide a current resume of your professional work experience since earning your bachelor's degree.  
A minimum of two years of professional experience is a requirement for admission.

Columbia Southern University  
 P.O. Box 3110 ~ 21982 University Lane  
 Orange Beach, AL 36561  
 251.981.3771 or 800.977.8449  
 Fax: 251.224.0540

## APPLICATION FEE

Your completed application must include a nonrefundable Application Fee.

Select One:	<input type="checkbox"/> \$25.00 Domestic (USA & Canada) <input type="checkbox"/> \$50.00 International		
Method of Payment:	<input type="checkbox"/> VISA/MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/> CHECK/MONEY ORDER ENCLOSED		
Card Number		Exp Date	
Name on Card			

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, Columbia Southern University may rescind my degree. If I am admitted and enroll at Columbia Southern University, I agree to abide by the rules and regulations of the University as contained in the University Catalogue and on the university website. I acknowledge that all official transcripts that I submit to the school will become the property of the University and will not be forwarded to another institution or returned to me.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

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