



## APPLICANT INFORMATION

Legal Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Status:  First Time Freshmen  Transfer  Re-admission  Other: \_\_\_\_\_

## EDUCATION

I certify that I have earned or will be earning a High School diploma or high school equivalency exam scores as described below.

High School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Graduation Year (expected): \_\_\_\_\_ G.P.A.: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_ Counselor's Phone: \_\_\_\_\_

*If applicable:*

High School Equivalency Exam Type: \_\_\_\_\_ Place Taken: \_\_\_\_\_ Year Taken: \_\_\_\_\_

Other Post-Secondary Institutions Attended:

\_\_\_\_\_  
\_\_\_\_\_  
(College) (City) (State) (Dates Attended)

## PERSONAL INFORMATION

Preferred Name: \_\_\_\_\_

Gender:  Female  Male  Prefer Not to Say  Other:

Primary Race/Ethnicity:  Native American/Alaskan Native  Asian  African-American/Black  
 Hispanic/Latino  Native Hawaiian/Other  Pacific Islander  Caucasian/White

Prefer not to say  Other:

Emergency Contact(s):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Do you possess any other qualifications not outlined in this application? If so, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the information included in this application and all accompanying materials is complete, true, and accurate to the best of my knowledge. I understand that providing factually incorrect information may reduce the chances of my admission, dismissal from the institution, and may be punishable under law.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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