



**The Restaurant School at Walnut Hill College**

**The Restaurant School At Walnut Hill College**

Office of Admissions  
4207 Walnut Street  
Philadelphia, PA 19104  
(215) 222-4200 extension 3011

**BACHELOR OF SCIENCE DEGREE ENROLLMENT APPLICATION**

*Documents Submitted To Meet Admissions and Residency Requirements Become The Property of Walnut Hill College And May Not Be Returned.*

TYPE OR PRINT IN INK AND COMPLETE ALL ITEMS

**PERSONAL INFORMATION**

NAME		FORMER LAST NAME ON TRANSCRIPTS	
Last	First	MI	
PERMANENT ADDRESS			
No. & Street		City	State Zip
HOME PHONE ( )	WORK PHONE ( )	E-MAIL ADDRESS	
SOCIAL SECURITY NUMBER	DATE OF BIRTH	AGE	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ARE YOU A UNITED STATES CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, COUNTRY OF CITIZENSHIP	COUNTRY OF BIRTH	VISA TYPE
IN CASE OF EMERGENCY, LIST NAME OF NEXT-OF-KIN (Mother, Father, Guardian, Spouse, Brother, Sister)			
Name	Relationship to you	Phone ( )	

**ADMISSIONS INFORMATION**

I have graduated from The Restaurant School. Dates attended: \_\_\_\_\_ Program attended: \_\_\_\_\_

I  Will  Will Not require on campus housing for my bachelors program.

**Please indicate course of study and starting date for Bachelor Degree Program.** This application must be submitted with a \$100.00 deposit. This deposit is refunded if candidate does not begin program. Deposit will be applied against tuition account for all matriculated students.

**Starting Date:**  February \_\_\_\_\_  September \_\_\_\_\_  
 Culinary Arts  Restaurant Management  
 Pastry Arts  Hotel Management

Candidates for the Bachelor of Science Degree Program must have completed all Associate of Science Degree requirements to be eligible. If the candidate is a current student of The Restaurant School at Walnut Hill College, the student may apply and acceptance will be contingent upon the successful completion of the Associate of Science Degree Program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian  
(required only when the enrollee is under the age of 18)

\_\_\_\_\_  
Date

Please forward all Admissions Correspondence to:  
Office of Admissions  
The Restaurant School at Walnut Hill College  
4207 Walnut Street  
Philadelphia, PA 19104

When forwarding correspondence pertaining to your application please be sure to include:

- Major and Starting Date
- Social Security Number

**IT IS ADVISABLE TO RETAIN A COPY OF ALL FORMS SUBMITTED.**

The Restaurant School at Walnut Hill College is committed to providing equal educational and employment opportunities for all persons, without regard to race, color, national and ethnic origin, age, religion, sex, sexual orientation, disability or veteran's status.