



Epicurean Institute



APPLICATION FOR ADMISSION

Full Name:

Last/family

First/given

Middle

Date of Birth:

Male

Female

SSN:

mm/dd/year

Current Address:

City:

State:

Zip Code:

Home Phone:

Work Phone:

Cell Phone:

Email:

Please indicate citizen status:

United States Citizen

Permanent Resident

Other

If "other", please indicate country of birth:

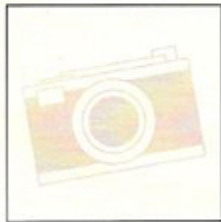
Country of Passport:

Citizenship:

Visa Status:

Passport number:

Please attach or email a passport photo:



PROGRAM OF INTEREST

In which of the following programs are you interested in enrolling?

Sommelier Course (Spring 2012)

Culinary Course (Spring 2012)

Hospitality Course (Summer 2011)

Chef Study (Spring 2012)

Tourist Study (Summer 2011)

Other

HOW WOULD YOU DESCRIBE YOURSELF

The Epicurean Institute is required to compile, maintain and submit the following information to federal agencies, to evaluate civil rights compliance.

- Black/African American American Indian Asian/Pacific Islander
 Hispanic White (not Hispanic) I respectfully decline to furnish this information

Marital Status (Optional)

- Single Married Divorced Separated Widowed

What is your first (native) language?

Do you speak and understand English? No Yes

PERSONAL HISTORY

Do you currently have any physical, mental, emotional and/or learning disabilities?

- No Yes, please explain:

Have you ever had any physical, mental, emotional and/or learning disabilities?

- No Yes, please explain:

Are you currently under any health care provider, for any physical, mental, emotional and/or learning disabilities?

- No Yes, please explain:

Are you currently taking any prescription medications, for any physical, mental, emotional and/or learning disabilities?

- No Yes, please explain:

Have you ever been convicted of a crime?

- No Yes, please explain:

Have you ever had privileges and/or a license of any kind (professional or otherwise) denied, suspended and/or revoked?

- No Yes, please explain:

Have you ever been dismissed from an academic institution?

- No Yes, please explain:

Please tell us how you first heard about the Epicurean Institute?

Please identify a person the Epicurean Institute might contact in case of an emergency:

Name:

Telephone:

Relationship:

EDUCATIONAL INFORMATION

Please enter your complete educational history.

Name of the school	Year of graduation	Contact Name Phone Information	City / State / Zip	Diploma / Certificate Grade Average

PLEASE SEND ADDITIONAL DOCUMENTS

EMPLOYMENT, VOLUNTEER, WORK & EXTRACURRICULAR ACTIVITIES

Employment	Name Employer / Contact Info.	Job Description
Date: from / to		
Date: from / to		
Date: from / to		
Date: from / to		
Date: from / to		

Volunteer Work	Name	Description
Date: from / to		
Date: from / to		
Date: from / to		
Date: from / to		

Extracurricular activities	Name	Description
Date: from / to		
Date: from / to		
Date: from / to		
Date: from / to		

List any Hobbies and other Interests

ATTACH ADDITIONAL PAGES

