The Denison-Columbus Alliance Application Checklist



Your completed application and all supporting documents must be postmarked by Friday, November 15, 2019. Late applications will not be considered.

Type or print neatly in black or blue ink only. Complete all parts of the application and return to:

The Denison-Columbus Alliance Selection Committee
I Know I Can
1108 City Park Ave., Suite 301
Columbus, Ohio 43206





Application Requirements:

\square Submit a one-page resume or list of activities.
☐ Submit a 250–500 word essay. <i>See page 3 of the application for details</i> .
☐ Submit an official high school transcript that verifies the following:
☐ Minimum cumulative GPA of 3.0, with course and grade information for each year of high school

☐ Completion of the CCS College Preparatory Curriculum, which includes:

English	4 credits	Science	3 credits	Technology	1 credit	Fine Arts	1 credit
Math	4 credits	Foreign Language	2 credits	Phys. Ed/ Health	1 credit		
Social Studies	3 credits	Internship	1 credit	Elective	3 credits		

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 □ Will graduate from a CCS High School in four years or less by June 30, 2020. □ Have taken ACT or SAT (Denison University is a test-optional university). 									
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Personal Information

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Legal Name		middle name	last nam	ne	
Preferred Name					
CCS ID#	Birthda	ite	Gende	er	
			n-dd-yyyy		
Permanent Home Address					
	number & street			apartment #	
_	city/town		state	zip/postal code	
Email Address	•	Phon	P		
Email Address		111011	home	student cell	
Do you give I Know I Can norm	nissian to sand to	yt massagas ta yaur	coll phono?	□ Vos. □ No.	
Do you give I Know I Can pern	iission to sena te	xt messages to your	cen phone:	□ Yes □ No	
If yes, please attach a statement Parent/Guardian Inforr					
Legal Name					
first/given nar		middle name	last nan	ne	
Relationship to You					
Permanent Home Address					
	number & street			apartment #	
-	city/town		state	zip/postal code	
Email Address		Phon	e		
				reach parent/guardian	
Educational Informatio	n				
Name of High School		Graduation	Date		
School Counselor	School Counselor Office Phone				
School Counselor Email Addre	c c				



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Educational Information (continued)

What is your anticipated college major or course of study?					
Have you ever participated in a Denison University-organized activity or sponsored event (e.g., college visit, college fair, school information session, etc.) \Box Yes \Box No If yes, please specify.					
Have you ever participated in an I Know I Can-organized school activity or sponsored event? ☐ Yes ☐ No If yes, please specify.					



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Essay

In 250-500 words, double-spaced, 12-point font

What will you bring to Denison University? Aside from your transcript and other information on your application, what additional information would you like to share about yourself with the selection committee?

Responsibilities

If selected for the Denison-Columbus Alliance, you will be expected to meet the responsibilities listed below. Failure to meet these responsibilities may result in a loss of part or all of the grant aid provided by the Denison-Columbus Alliance.

□ Submit a non-refundable enrollment deposit of \$50 by May 1, 2020.					
☐ Attend June orientation session for new Denison students.					
□ Attend a pre-first year academic workshop in August.					
☐ Attend on-campus weekly group/mentor meeting (first two years).					
□ Attend biweekly one-on-one mentor meetings (first two years).□ Participate in regular peer mentor meetings.					
☐ Participate in regular peer mentor meetings. ☐ Attend annual/semester retreats (all four years).					
□ Serve as a peer mentor (during upperclass years).					
□ Maintain good academic standing in college (all four years) with a 2.0 cumulative GPA.					
The Denison-Columbus Alliance provides recipients with total grant aid of at least the full cost of tuition for four years.					
Acknowledgment and Consent					
By signing this document, I hereby affirm that all of the information probest of my knowledge.	rovided herein is true and complete to the				
signature	date				
o.g., w.c., c					