



GEORGIA CHRISTIAN UNIVERSITY

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GCU

STUDENT DISCLOSURE AGREEMENT

Please accept this signed form as authorization to send my Student Disclosure Agreement to Georgia Christian University.

1. I have read the Georgia Christian University Catalog and Student Handbook and have enrolled with full knowledge of its standards and practices for postsecondary education.
2. I understand that attendance at Georgia Christian University is a privilege and not a right. Students forfeit this privilege if they do not conform to the standards and ideals of work and life of the University, and the University may insist on the withdrawal of a student at any time that the student, in the opinion of the University, does not conform to the spirit of the foundations.
3. I understand the required fees, tuition and refund policy of Georgia Christian University.
4. I understand that the catalog contains current information regarding the University's calendar, fees, admissions policies, degree requirements, regulations and course offerings, and that Georgia Christian University reserves the right to withdraw a course at any time; change tuition and other fees; revise the calendar and rules regarding admission and graduation requirements; and revise any other regulations affecting the student body. Revisions shall become effective whenever the proper authorities so determine and shall, at the discretion of such authorities, apply not only to prospective students but also to those who at that time are matriculated in the University.
5. I understand the student dismissal policy of Georgia Christian University.
6. I understand that the ministry educational programs offered by Georgia Christian University are designed for ecclesiastical vocations.
7. I understand that Georgia Christian University is not accredited by any agency under the guidance of the United States Department of Education, and that the transfer of credit is left to the discretion of the receiving institution.
8. I understand that Georgia Christian University is not responsible for my employment with any church, denomination, religious or secular organizations and entities with which I make application.
9. I understand that all course work required for credit at Georgia Christian University must be my own work.
10. I understand that I will be responsible for all unpaid fees and incurred interest expenses and will not be able to receive official documents including transcripts until such fees are paid in full.
11. I understand the context of Release and Assignment Form which is required to be submitted prior to admission. In the event that a photographer or video camera person of Georgia Christian University takes a picture with me in it, either singly or in a group, I give permission for my picture to be used in future brochures, videotapes or other publications of Georgia Christian University.
12. I have not been misled in my inquiry for enrollment with Georgia Christian University and hold the University harmless from any and all of my own misunderstandings.

I have read this form carefully and understand the consequences of my decision to agree on each agenda prescribed above.

Applicant's Name (Please print) : _____

Signature : _____

Date : _____

This form should be retained for five (5) years in the student file.