



# SHORTER COLLEGE

## Application for Undergraduate Admission

Please check all that apply:

**Enrollment Year 20\_\_\_\_\_**

- Fall Semester (Aug-Dec)
- Spring Semester (Jan-May)
- Summer I (May-Jun)
- Summer II (Jul-Aug)

**I will enter the College as a:**

- Freshman
- Sophomore

**My enrollment status at the College will be:**

- First enrollment at any college or university
- Transfer from another college or university
- Returning, former Shorter College student
- Previously applied, but did not attend
- Transient (taking courses while currently enrolled at another institution)
- Special Student (non-degree seeking)

**Degree Seeking - Associate of Arts: Check one**

- General Studies
- Christian Leadership
- Criminal Justice
- Entrepreneurial Studies
- Childhood Development

Please type or print clearly and complete all sections. Incomplete applications will not be processed.

**Salutation:**  Mr.  Mrs.  Ms.  Miss

**Maiden Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_  
Last First Middle

**Date of Birth:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_  
Month/Day/Year City State County Country of Citizenship

**Permanent Address:** \_\_\_\_\_  
Street City State Zip Code

**County:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_  
(Area Code) Cell Phone Number (Area Code) Home Phone Number

**Emergency Contact:** \_\_\_\_\_ **Relationship to you:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
Last First (Area Code) Phone Number

**REFERRAL SOURCE:**  Recruiting Event  Billboard  Radio/TV  Referral  Walk-in  Campus Event  Alumni  Other: \_\_\_\_\_

### RACE AND ETHNICITY IDENTIFICATION

These questions comply with the U.S. Department of Education's implementation of the Office of Management and Budget's 1997 standards for maintaining, collecting, and presenting federal data on race and ethnicity. Information requested in this section regarding race or ethnicity is voluntary and will be used in a nondiscriminatory manner consistent with applicable civil rights laws.

**Gender:**  Male  Female  Other **Marital Status:**  Single  Married  Divorced  Separated

**Are you a veteran?**  Yes  No If yes, military branch: \_\_\_\_\_

**Do you receive veteran's benefits?**  Yes  No **I am a dependent or spouse of an U.S. active duty service member?**  Yes  No

**Ethnic Origin: Check all that apply**

- Black/African American
- Non-Hispanic/Non-Latino
- American Native/Alaskan Native
- Hispanic/Latino
- White/Caucasian
- Multiracial
- Asian
- Native Hawaiian or Other Pacific Islander

**Resident Status: Check one**

U.S. Citizen       Resident Alien       Non-Resident Alien       Other (please specify) \_\_\_\_\_

**Religious Affiliation:** \_\_\_\_\_

**FAMILY INFORMATION**

**Father's Education (check one):**

- Some High School
- High School Graduate
- Some College
- College Graduate (Bachelor's Degree)
- Graduate/Professional Degree

**Mother's Education (check one):**

- Some High School
- High School Graduate
- Some College
- College Graduate (Bachelor's Degree)
- Graduate/Professional Degree

**EDUCATIONAL INFORMATION**

**Did you receive a high school diploma?**  Yes  No      **Did you receive a GED?**  Yes  No      If yes, state GED received in \_\_\_\_\_

**High School Attended:**

| Name of School | City  | State | Zip Code | Graduation Date |
|----------------|-------|-------|----------|-----------------|
| _____          | _____ | _____ | _____    | _____           |
| _____          | _____ | _____ | _____    | _____           |
| _____          | _____ | _____ | _____    | _____           |

**Have you ever attended any other colleges/universities?**  Yes  No

| Name of College/University | City  | State | Dates Attended | Graduation Date |
|----------------------------|-------|-------|----------------|-----------------|
| _____                      | _____ | _____ | _____          | _____           |
| _____                      | _____ | _____ | _____          | _____           |
| _____                      | _____ | _____ | _____          | _____           |

**STUDENTS with DISABILITIES**

**Are you disabled or have a special need?**  Yes  No      If yes, please specify the need: \_\_\_\_\_

**Will you require educational accommodation(s)?**  Yes  No      If yes, please specify the accommodation(s): \_\_\_\_\_

**STUDENT SIGNATURE**

I certify that the statements made in this application are accurate and complete to the best of my knowledge. If admitted, I agree to comply with the rules and regulations of the College. I understand that falsification or failure to provide full documentation may result in the cancellation of my admission and/or dismissal from the College.

|           |       |
|-----------|-------|
| Signature | Date  |
| _____     | _____ |

**Required Documents for Admissions**

- Completed "Application for Undergraduate Admissions"
- Official high school transcript with graduation date listed or proof of GED
- Official ACT, SAT, Compass or Accuplacer test scores. (Note: The Accuplacer test may be taken on campus prior to being fully admitted.)
- Copy of immunization record, to include proof of two measles, mumps and rubella (MMR) vaccines (if born after 1/1/1957)

**Mail completed applications to:** Office of Admissions | Shorter College | 604 North Locust Street | North Little Rock, AR 72114. Please feel free to contact our office at (501) 374-6305, ext. 113 or visit our website at [www.shortercollege.edu](http://www.shortercollege.edu).

Shorter College is an equal educational opportunity institution; its students, faculty, and staff members are selected without regard to age, race, color, creed, gender, disability, handicap, sexual orientation, veteran status or national origin, consistent with the Assurance of Compliance with Title VI of the Civil Rights Act of 1964.