



OFFICE OF ADMISSIONS

1530 Harden Street ▪ Columbia, South Carolina 29204
Phone: 803-376-5735 ▪ Toll-Free: 877-625-5368 ▪ Fax: 803-376-5731

UNDERGRADUATE APPLICATION FOR ADMISSION

Please type or print in blue or black ink only.

- Enrollment Type:** First-Time Freshmen Transfer Non-degree Seeking Re-Admit
- Proposed Enrollment Term and Year:** Fall 20_____ Spring 20_____
- Enrollment Status:** Full-time Part-time
- Housing Status:** Resident Student Non-Resident Student

PERSONAL INFORMATION *Required Information

*Social Security Number: _____ - _____ - _____ *Date of Birth: ____/____/____

Name:

First Middle Last Suffix

Permanent Address:

City, State, Zip: _____ County: _____

Mailing Address (If different from permanent address): _____

City, State, Zip: _____ County: _____

Email Address:

Permanent Telephone: _____ Mobile Telephone: _____

- Are you a U.S. citizen? Yes No (If no, please indicate citizenship status):
- Dual U.S. Citizen, please specify _____
- Resident Alien, Registration # _____
- Other, please specify _____

Gender: Male Female

Ethnicity: African American (Non-Hispanic) Caucasian Hispanic

Religious Denomination: _____ Church Affiliation: _____

Are you a veteran? Yes No Dependent of a veteran? Yes No

Have you ever been convicted of a felony? Yes No (If yes, please explain) _____

FAMILY INFORMATION

Emergency Contact Name: _____

Relationship: _____

FAMILY INFORMATION CONTINUED...

Permanent Telephone: _____ Mobile Number: _____

Please list any relatives who attend/attended Allen University and indicate their relationship to you.
Name Relationship Class Year (or years attended)

ACADEMIC INFORMATION

High School/College Attended: _____
Full Name of School City, State Dates Attended

Graduation Date: _____

Guidance Counselor Name: _____ Telephone: _____

Have you earned a GED? Yes No

If yes, name of issuing agency: _____ Date Issued: _____

Please list any extracurricular activities including community service and work experience. Indicate any leadership positions held and/or honors received.

ANTICIPATED MAJOR (PLEASE CHECK ONE)

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Biology | <input type="checkbox"/> English | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Social Science |
| <input type="checkbox"/> Chemistry | <input type="checkbox"/> Music | <input type="checkbox"/> Undeclared |

How did you hear about Allen University?

- | | | |
|---|--|--|
| <input type="checkbox"/> Guidance Counselor | <input type="checkbox"/> Allen University Graduate | <input type="checkbox"/> Admissions Representative |
| <input type="checkbox"/> Church | <input type="checkbox"/> Website | <input type="checkbox"/> Other _____ |

THE SUBMISSION OF FRAUDULENT RECORDS OR OMISSION OF COLLEGE HISTORY CONSTITUTES GROUNDS FOR DENIAL OF ADMISSION TO ALLEN UNIVERSITY OR DISMISSAL FROM THE UNIVERSITY.

As an Allen University student, I agree to abide by the rules and regulations as they are set forth in the catalog, handbook, and other official documents of Allen University. I do hereby certify that the given information on this application is true and correct. I also authorize Allen University to request copies of my academic transcripts as needed.

Applicant Signature _____ Date _____

Parent or Guardian Signature (if applicant is under 18) _____ Date _____

*For admission consideration, please submit Official High School/College Transcripts.
For scholarship consideration, please submit ACT and/or SAT scores.*