

**SPECIAL INTERESTS/EXTRACURRICULAR ACTIVITIES** (list clubs, sports, vocal groups, etc.)

Activity	Grade Level				Approximate time spent hrs./wk. or wks./yr.	Positions held, honors won or letters earned	Do you plan to participate in college?
	9	10	11	12			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No

**ACADEMIC HONORS** (check all that apply)

Grade Level 9  10  11  12

Grade Level 9  10  11  12

Grade Level 9  10  11  12

Grade Level 9  10  11  12

**FAMILY AND FRIENDS** (list the members of your family and friends who have attended or currently attend Barton College; include relationship)

Name Relationship

Name Relationship

Name Relationship

**PERSONS OUTSIDE THE IMMEDIATE FAMILY TO NOTIFY IN AN EMERGENCY**

Name Address Telephone

Name Address Telephone

**HOW DID YOU FIRST LEARN ABOUT BARTON COLLEGE?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**WHY DO YOU WANT TO ATTEND BARTON COLLEGE?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**RESIDENCE LIFE HOUSING POLICY**

College policy states that all full-time freshmen and sophomores not residing with their own families, parents or relatives must live in college housing when available. Students not living with their own families may secure off-campus housing only by obtaining the written permission of the vice president of student affairs.

I will need on-campus housing.  Yes  No Have you ever been convicted of a criminal offense or are there charges pending against you?  Yes  No If yes, please attach explanation.

**CERTIFICATION STATEMENT** (required of all applicants)

In signing this application, I signify the information is, to the best of my knowledge, factually correct and honestly presented. If accepted to the college, I agree to abide by the rules, honor code and regulations of the college.

Date Signature Please print your name here

# ACHIEVE Barton College Application for Admission THINK CONNECT

**\* INSTRUCTIONS**

This application is for full-time undergraduate applicants.

Students planning to enroll part-time or during summer sessions should request an application from Lifelong Education by calling 800.767.6305 or 252.399.6306.

**\* Mail completed application to**

Office of Admissions  
Barton College  
P.O. Box 5000  
Wilson, NC 27893-7000  
For additional information, call 800.345.4973 or 252.399.6317.

**\* Please include the following**

\$25 application fee (\$50 for international students)

Official transcripts (may be mailed separately)

SAT or ACT scores (may be mailed separately; not required of transfer students)

**WWW.BARTON.EDU**

**PERSONAL DATA** *(please print)*

Last Name		First Name		Middle	Preferred Name to be Called
<b>Social Security Number:</b> <i>(for identification purposes only)</i> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
Street Address		City	State/Province	County	ZIP/Postal Code
Mailing Address (if different from above)		City	State/Province	County	ZIP/Postal Code
Home Telephone Number		Cell Phone Number		Country of Citizenship	
Email Address		Check which Internet connection you use: <input type="checkbox"/> DSL/Cable/ISDN <input type="checkbox"/> 56.6K Modem <input type="checkbox"/> Other			
IM Screen Name		Check which service you use: <input type="checkbox"/> AIM <input type="checkbox"/> MSN <input type="checkbox"/> Yahoo <input type="checkbox"/> ICQ <input type="checkbox"/> Google Talk <input type="checkbox"/> Other			

**Ethnic Background:** *(optional, please check one)*  American Caucasian  American Hispanic  African American  Native American  International  Other (specify)

**Religious Affiliation:** *(optional)*

Denomination  No Preference

Name of Church

Location (city, state)

**Age and Gender:** Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth (city, state) \_\_\_\_\_  Male  Female

**STUDENT'S EMPLOYER**

Company/Organization

Position Telephone Number

**PARENT OR GUARDIAN INFORMATION** *(list twice for two parents/guardians if applicable)*

Parent/Guardian Name (first, middle, last) Parent/Guardian Name (first, middle, last)

This is my primary parent/guardian:  Yes  No Relationship This is my primary parent/guardian:  Yes  No Relationship

Home Address Home Address

City State/Province County ZIP/Postal Code City State/Province County ZIP/Postal Code

College/Graduate School (if applicable) College/Graduate School (if applicable)

Degree/Year Occupation/Position Degree/Year Occupation/Position

Employer Employer Address Employer Employer Address

Employer Work Phone Email Address Employer Work Phone Email Address

**FINANCIAL AID:** Will you apply for financial aid?  Yes  No

**VETERAN STATUS:** *(if you receive Veterans' Benefits, check one)*  Veteran  Child of Veteran

**ACADEMIC STATUS:** Are you in school now?  Yes  No If yes, check one:  High School  College Are you taking AP or IB classes?  Yes  No

Have you taken the SAT or ACT?  Yes  No If no, when you do plan to take it? \_\_\_\_\_

If you plan to take the SAT or ACT again, please give date \_\_\_\_\_

Have you applied for admission to Barton College previously?  Yes  No If yes, when? \_\_\_\_\_

**TERM OF ENROLLMENT:** Fall of 20 \_\_\_\_\_ Spring of 20 \_\_\_\_\_

**APPLICATION TYPE:** *(check all that apply)*  Freshman  Transfer  Re-admit  International  Teacher Certification only

**TRANSFER STUDENTS**

Are you eligible to return to the institution you last attended?  Yes  No Reason for leaving \_\_\_\_\_

**EDUCATIONAL BACKGROUND** List all high schools and colleges you have attended. Attach page if necessary. In addition, please list other colleges to which you are applying.

Name of School	City	State	Dates Attended	Public or Private	Graduation Date	Name of Guidance Counselor

**AREA OF STUDY** *(check your first choice)*

- Accounting
- Criminal Justice and Criminology, Concentrations in:  
 General Criminal Justice  
 Law Enforcement
- Management of Human Resources
- Pre-Engineering Dual-Degree Program
- Studio Art, Concentrations in:  
 Ceramics  
 Graphic Design  
 Painting  
 Photography
- Art Education (K-12)
- Education of the Deaf and Hard of Hearing (K-12)
- Mass Communications, Concentrations in:  
 Audio Recording  
 Broadcast/Video  
 Print and Electronic Journalism
- Psychology
- Religion and Philosophy
- Social Studies with Teacher Licensure (9-12)
- Social Work
- Spanish\*
- Special Education: General Curriculum (K-12)
- Theatre, Concentrations in:  
 Design  
 Management  
 Performance
- Biology  
 Medical Technology  
 Pre-Dentistry  
 Pre-Medicine  
 Pre-Physical Therapy  
 Pre-Veterinary Medicine
- Elementary Education (K-6)
- English\*
- Physical Education (6-9)
- Physical Education (K-12)
- Theatre, Concentrations in:  
 Design  
 Management  
 Performance
- Business Administration
- Environmental Science
- Fitness Management
- Political Science, Concentrations in:  
 Business  
 Pre-Law
- Chemistry  
 Pre-Pharmacy
- Gerontology
- Sport Management
- Computer Information Systems
- History
- Undecided

\*Degree program is available with or without teacher licensure program. Do you plan to pursue secondary teacher certification within your major?  Yes  No

**INTERNATIONAL STUDENTS ONLY**

Are you a permanent resident or green card holder?  Yes  No If yes, what is your alien registration number? \_\_\_\_\_

If you are **NOT** a permanent resident or green card holder, do you have a U.S. visa?  Yes  No If yes, what type and for how long is/was it valid? \_\_\_\_\_

Do you have permission for lawful employment in the U.S.?  Yes  No If yes, when was it granted and for how long? \_\_\_\_\_

Have you taken the TOEFL?  Yes  No If yes, when and what score did you receive? \_\_\_\_\_

What is the source of your financial support? \_\_\_\_\_

If you plan to take the SAT or ACT again, please give date \_\_\_\_\_