

HENDERSON STATE UNIVERSITY

APPLICATION FOR UNDERGRADUATE ADMISSION *(please print)*



1. Legal Name _____
Last First Middle Maiden
2. Social Security No. _____ 3. E-mail Address _____
4. Applying for (Check one): Fall _____ Spring _____ Summer 1st Term _____ Summer 2nd Term _____
YEAR YEAR YEAR YEAR
5. Are you attending: Summer Only One course only One course to be taken _____
LIST HERE
6. Sex Male Female 7. Date of Birth ____/____/____ 8. Place of Birth _____
Month Day Year
9. Are you a U. S. Citizen? Yes No
 If you are not a U.S. Citizen, provide your Alien Number A _____
 If you are not a U.S. Citizen, are you lawfully present in the U.S.? Yes No
10. Ethnicity - Are you Hispanic or Latino? Yes No 11. Race - Which best describes you? Choose one or more of the following categories. 1. American Indian or Alaska Native 2. Asian 3. Black or African American 4. Native Hawaiian 5. White
12. Church Preference (Optional) _____ 13. Military Vet? Yes No
14. Area of study or major you wish to pursue? _____
15. Type of degree you are seeking? Associate's Bachelor's Non-degree
16. Henderson Classification Freshman Sophomore Junior Senior Certification Special (Concurrently enrolled in high school)
17. You plan to attend classes (Check one): On-Campus On-line
18. Have you previously applied to enter Henderson? Yes No 19. If yes, did you attend? Yes No
20. If item 17 is yes, under what name did you attend? _____
 If item 17 is yes, when did you last attend Henderson? ____ / ____ / ____ Student ID No. _____
Semester Year
21. List the last high school you attended. Then list all colleges and universities you have attended in chronological order. *You (the applicant) must request each college or university you attended to SEND an official transcript of work DIRECTLY to the Office of University Relations/Admissions, 1100 Henderson St., Box 7560, Arkadelphia, AR 71999-7560. (Required) Hand-delivered transcripts are not considered official.*

Failure To Submit Official Required Information May Result in Dismissal from the University.

Name of School	City	State	Dates Attended	Year Graduated	Degrees/Hours Earned
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High School _____

College _____

22. Check here if entering with a GED High School Certificate. Yes
23. Are you currently eligible to return to your present college? Yes No
24. Have you ever received an academic or disciplinary suspension? Yes No
 If yes, where _____ and when ____/____/____?
25. Have you ever been convicted of, or pled guilty to, a felony? No Yes _____
Please Describe
26. Parent's permanent mailing address/phone: (if student under 24 yrs. of age)

Street _____ Phone Number _____

City _____ State _____ Zip Code _____ County/Parish _____

27. Student permanent mailing address/phone:

Street _____ Phone Number _____

City _____ State _____ Zip Code _____ County/Parish _____

**HSU
USE ONLY**

ADVISOR

TERM

ACT/SAT

E/CR

M

RD

SR

CP

**ASSET/
COMPASS**

Reading

Lang

Math

CP

Residual Dates

**CLASS
RANK**

CODE

HS GPA

HR

RL

SA

Accepted

Yes No

Initials

Date

28. Did either of your parents complete a four-year college degree? Mother Father Both Neither

29. Did either of your parents ever attend Henderson? Mother Father Both Neither

30. Did either of your parents receive a degree from Henderson? Mother Father Both Neither

31. How long have you lived continuously in Arkansas this current stay? _____

32. Upon entering Henderson, you plan to: Live in University Housing Live off-campus

I understand and agree that during my tenure as a student at Henderson State University, I am responsible for paying when due all charges associated with enrollment and attendance at Henderson.

Indicate by signing below that you have read and understand all the information on this application, both front and back, and the information you have provided is factually correct and honestly prepared.

Your signature below also indicates that you give permission to Henderson State University to use, in booklets, press releases and other promotions, the applicant's name and any school photograph or video or footage in which this applicant may appear. These images may appear in a wide variety of formats and media now available to the university and that may be available in the future, including but not limited to print, broadcast, videotape, CD-ROM and electronic/online media.

34. Date

SIGNATURE

The campus coordinator for the Americans With Disabilities Act and Sec. 504 of the Rehabilitation Act is the General Council to the President, HSU Box 7744.

It is the policy of Henderson State University not to discriminate on the basis of race, color, national or ethnic origin, sex, marital or veteran status, age, or disability. Henderson works continually to assure compliance with applicable federal laws, including among others, the Civil Rights Acts; the Education Amendments; the Rehabilitation Act; the Americans With Disabilities Act; the Family Educational Rights and Privacy Act; the Student Right to Know Act; the Campus Security Act; and the Drug-Free Schools and Communities Act.

State of Arkansas

Statement of Selective Service Status

In Compliance with Act 228 of the 1997 Acts of the Arkansas General Assembly

I understand that to be eligible for admission to Henderson State University, I must register, or be exempt from registration, with the Selective Service System in accordance with the Military Selective Service Act, 50 U.S.C. Appx §451 et seq., as specified in Act 228 of the 1997 Acts of the Arkansas General Assembly. I therefore swear or affirm under penalty of perjury that I have registered with the Selective Service System, or I am exempted from such registration because of the following provision(s) of the Military Selective Service Act or Act 228 of the 1997 Acts of the Arkansas General Assembly.

- I am a female
- I am a current member of the armed forces on active duty
- I am under 18 years of age
- I am 26 years of age or over
- I am an exempted resident alien
- other, specify below

Name (PLEASE PRINT) _____ Date _____

Social Security Number _____

SIGNATURE _____

Please return to:

**University Relations/Admissions
HSU Box 7560
Arkadelphia, Arkansas 71999-0001**