

High Point University Summer School Application

****Must be completed in full****

Social Security Number _____ Date of Birth _____

Legal Name _____

Current Mailing Address _____ Valid Until _____
(Street, City, State, & Zipcode)

Permanent Address _____ Home # _____
(Street, City, State, & Zipcode)

Cell # _____

E-mail Address _____

If under 23 please provide Emergency contact:

Name of person to contact in Emergency _____

Address of Emergency Contact _____ Phone # _____
(Street, City, State, & Zipcode)

Phone # _____

Please select your current student status:

_____ Graduating High School Senior

_____ Non-Degree Seeking

_____ High School Senior Next Fall (2009)

_____ Enrolled in another College/University

Have you previously attended High Point University? Yes No

If you have attended High Point University under a surname other than that shown above, please give name:

Select all sessions for which you need on campus room and board: Session I Session II

Do you plan to attend High Point University in the Fall? Yes No

Your "yes" answer to the following question will not necessarily preclude your being admitted. However, your failure to provide complete, accurate, and truthful information will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.

Have you ever been convicted of a crime? If Yes, please describe. Yes No _____

I hereby attest that all information is accurate to the best of my knowledge. I fully understand that any falsification of facts will deny my admission to High Point University or, if accepted, will result in my dismissal from the University.

Date: _____

Applicants Signature: _____

If you are a visiting student (not currently enrolled at High Point University) **complete the application and send it to:**

Evening Degree Program
High Point University
833 Montlieu Avenue
High Point, NC 27262-3598

E-mail to edp@highpoint.edu or Fax to 336.841.9024