



HARDING

UNIVERSITY

PHOTO
(Optional)
Sending a photo gives
a personal touch so
we may know you as a
face, not just a name.

915 E. MARKET AVE.
SEARCY, AR 72149
TEL: 800-477-4407
FAX: 501-279-4129

APPLY ONLINE AT:
WWW.HARDING.EDU

Application for Undergraduate Admission

PLEASE SUBMIT WITH NON-REFUNDABLE APPLICATION FEE OF \$40

Section I. Personal Information

PLEASE TYPE OR PRINT USING ALL CAPITAL LETTERS

LEGAL NAME: LAST FIRST MIDDLE INITIAL

PREFERRED NAME: SOCIAL SECURITY NUMBER:

ADDRESS: STREET, RURAL ROUTE, P.O.BOX CITY STATE ZIP

HOME PHONE: () CELL PHONE: ()

E-MAIL ADDRESS: DATE OF BIRTH: MONTH, DAY, YEAR MALE FEMALE

RELIGIOUS PREFERENCE: MEMBER? YES NO WHICH CONGREGATION?

FATHER'S NAME: ADDRESS: (IF DIFFERENT FROM YOURS) CITY STATE ZIP

OCCUPATION: HARDING ALUMNUS: YES NO

E-MAIL ADDRESS: PHONE: ()

MOTHER'S NAME: ADDRESS: (IF DIFFERENT FROM YOURS) CITY STATE ZIP

OCCUPATION: HARDING ALUMNUS: YES NO

E-MAIL ADDRESS: PHONE: ()

PARENT(S) RELIGIOUS PREFERENCE: MEMBER(S)? YES NO WHICH CONGREGATION?

THE FOLLOWING INFORMATION WILL BE USED IN A NONDISCRIMINATORY MANNER CONSISTENT WITH APPLICABLE CIVIL RIGHTS LAWS

- HAVE YOU BEEN CONVICTED OF A CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION? YES NO
- HAVE YOU, FOR ANY REASON, BEEN SUSPENDED OR DISMISSED FROM AN ACADEMIC INSTITUTION? YES NO

• NOTE: IF YOU ANSWERED "YES" TO EITHER OF THE LAST TWO QUESTIONS, PLEASE ATTACH A BRIEF EXPLANATION.

- ARE YOU A U.S. CITIZEN? YES NO IF NO, PLEASE CHECK ONE OF THE FOLLOWING:
 PERMANENT RESIDENT TEMPORARY RESIDENT OF THE U.S.

- ARE YOU HISPANIC OR LATINO? YES NO
- PLEASE, SELECT ONE OR MORE OF THE FOLLOWING RACIAL GROUPS THAT APPLY TO YOU:
 AMERICAN INDIAN OR ALASKA NATIVE ASIAN BLACK OR AFRICAN AMERICAN
 NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER WHITE

Section II. Enrollment Information

INTENDED MAJOR: DO YOU PLAN TO TEACH? YES NO

TERM OF INTENDED ENROLLMENT: FALL SPRING SUMMER YEAR: _____

STATUS: FIRST-TIME FRESHMAN TRANSFER (HOW MANY HOURS? _____) ADVANCED STUDY
 EARLY ENTRANCE TRANSIENT

• NOTE: TRANSFER STUDENTS WITH 14 OR MORE HOURS DO NOT NEED TO SUBMIT ACT/SAT SCORES

HAVE YOU TAKEN THE ACT OR SAT? YES WHICH ONE, AND WHEN DID YOU TAKE IT? _____

NO WHICH ONE, AND WHEN DO YOU PLAN TO TAKE IT? _____

(TEST, MONTH, YEAR)

DID YOU ASK THE TESTING SERVICE TO SEND THE RESULTS TO HARDING? YES NO

OFFICE USE ONLY
Admissions progress

Application Fee
\$ _____
PD _____

Housing Deposit
\$ _____
PD _____

Housing Form

(sent to housing)

ACT/SAT
ACT composite: _____
SAT score: _____

Immunization Record
 Academic Reference
 Character Reference
 H.S. Transcript

 College Transcript
(1st) _____
 College Transcript
(2nd) _____



Section III. Education

DID YOU GRADUATE HIGH SCHOOL? YES NO GED STILL ENROLLED

NAME OF HIGH SCHOOL: CITY, STATE, ZIP

DATE OF (OR ANTICIPATED DATE OF) GRADUATION: MONTH, YEAR

HOME SCHOOLED GRADES: 9 10 11 12

SCHOOLS OR COLLEGE(S) ATTENDED: (LIST MOST RECENT FIRST)
NAME LOCATION

DATES ATTENDED

DEGREES OR DIPLOMA

LIST HIGH SCHOOL/COLLEGE ACTIVITIES, HONORS, ETC.

ARE YOU PRESENTLY APPLYING, OR DO YOU PLAN TO APPLY TO ANY OTHER COLLEGE(S)? YES NO
IF SO, WHERE?

Harding University does not discriminate on the basis of race, color, creed, religion, sex, marital status, age, disability, national or ethnic origin, or receipt of public assistance in its educational programs, activities or employment to the extent required by law, except where necessitated by religious tenets held by the institution and its controlling body.

Section IV. Additional Information

UNIVERSITY HOUSING:

I PLAN TO LIVE IN A RESIDENCE HALL ON CAMPUS.

I AM AGE 23 OR OLDER AND WILL LIVE OFF CAMPUS.

I AM AGE 23 OR OLDER AND DESIRE CAMPUS APARTMENT.

I AM A MARRIED STUDENT AND WILL LIVE OFF CAMPUS.

I AM A MARRIED STUDENT AND DESIRE CAMPUS APARTMENT.

I WILL COMMUTE FROM HOME OR LIVE WITH RELATIVES.

WITH WHOM? _____

HAVE YOU EVER VISITED CAMPUS? YES NO

IF YES, FOR WHAT EVENT(S) WHEN?

HOW DID YOU LEARN ABOUT HARDING UNIVERSITY?

ALUMNUS OF THE UNIVERSITY CURRENT STUDENT

FRIEND

GUIDANCE COUNSELOR

INTERNET/MEDIA

MAIL FROM HARDING

NATIONAL PUBLICATION ABOUT COLLEGES/UNIVERSITIES

MINISTER

RELATIVE

FACEBOOK

OTHER

DO YOU HAVE ANY OTHER FAMILY MEMBERS THAT HAVE ATTENDED HARDING? YES NO

IF YES, WHAT'S THE RELATION AND WHEN DID THEY ATTEND?

PLEASE LIST BROTHERS OR SISTERS IN NINTH THROUGH 12TH GRADE:

NAME

ADDRESS (IF DIFFERENT FROM YOURS)

CITY/STATE

GRADUATION YEAR

BIRTH DATE

PLEASE RETURN TO:

Harding University
Office of
Admissions Services

Box 12255
915 E Market Ave
Searcy, AR
72149-2255

Fax: 501-279-4129

Apply online at:
www.harding.edu

Section V. Please Read and Sign

To the best of my knowledge, the foregoing is correct and complete. Furthermore, as a Harding University student, I agree to abide by all rules, regulations and requirements of the University, including financial matters. I also agree that any credit balance on my account in the Business Office may be applied to other debts to the University. I understand that amounts received from aid awards will be credited to my school account. If a credit balance results, I authorize Harding University to hold my credit until I make written request for it.

X

SIGNATURE OF APPLICANT

DATE

PLEASE MAKE CHECKS OR MONEY ORDERS PAYABLE TO HARDING UNIVERSITY. CALL OUR OFFICE AT 800-477-4407 TO PAY BY CREDIT CARD.