

## UNDERGRADUATE ADMISSION APPLICATION

Applying for:  Fall Semester 20\_\_  Spring Semester 20\_\_  May Term 20\_\_  Summer Semester 20\_\_

Name \_\_\_\_\_ Social Security Number   
*last first middle*

Permanent Address (Mailing Address) \_\_\_\_\_  
*street city state zip code*

Phone (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ County of Residence \_\_\_\_\_  
*home cell*

Name you prefer to be called \_\_\_\_\_ E-mail Address \_\_\_\_\_

Gender  Female  Male Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Do you plan to live on campus?  Yes  No

Do you intend to apply for financial aid?  Yes  No

Are you a U.S. citizen?  Yes  No

If no:

Permanent U. S. Resident (submit a copy of both sides of your permanent resident card)

Other: Country of citizenship \_\_\_\_\_ Visa type \_\_\_\_\_

*Optional: Your response to the items in this section is voluntary. No information you provide will be used in a discriminatory manner.*

Marital Status \_\_\_\_\_ Religious Affiliation \_\_\_\_\_

Are you a veteran of, or currently serving in, the U.S. military?  Yes  No

Are you Hispanic or Latino?  Yes  No

Regardless of your answer to the prior question, please indicate the race(s) with which you identify:

American Indian or Alaska Native  Native Hawaiian or Other Pacific Islander

Asian  White

Black or African American

Please specify any special accommodations you have that should be brought to the attention of the College: \_\_\_\_\_

What academic major(s) are you considering? *(if undecided, please state)* \_\_\_\_\_

What career(s) are you considering? *(if undecided, please state)* \_\_\_\_\_

Do you plan to teach?  Yes  No Will you be attending  Full-time  Part-time

High school name \_\_\_\_\_ Year of high school graduation \_\_\_\_\_

High school counselor \_\_\_\_\_

Please list any extracurricular activities you participate in (e.g. music, theater, student government, clubs, organizations, athletics, etc.):

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List any activity/sport you plan to participate in while at college:

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Have you applied or do you plan to apply to other universities or colleges?  Yes  No

If yes, which one(s)? \_\_\_\_\_

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How did you first learn about MacMurray College?

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Name and mailing address of parent or legal guardian:

List full names of relatives who are MacMurray alumni:

<i>name</i>			<i>name</i>	<i>relationship</i>	<i>class year</i>
<i>street</i>			<i>name</i>	<i>relationship</i>	<i>class year</i>
<i>city</i>	<i>state</i>	<i>zip code</i>	<i>name</i>	<i>relationship</i>	<i>class year</i>

THE FOLLOWING SECTION TO BE COMPLETED BY TRANSFER APPLICANTS ONLY!

Are you currently enrolled in college?  Yes  No

You must list all institutions you have attended since high school (including MacMurray) and, if applicable, the college you are presently attending. You must submit to MacMurray an official transcript from each institution attended.

College/University (in chronological order)	City	State (or country)	Dates of Attendance		Credits Completed	Credits in Progress
			From	To		
			/ - /			
			/ - /			
			/ - /			
			/ - /			
			/ - /			
			/ - /			
			/ - /			

\* If my application to MacMurray College is accepted, I agree to carry out the requirements for graduation in effect at the time of my enrollment at the College and to abide by all regulations. I understand that my acceptance may be revoked at any time if pertinent information is found to be falsified or withheld. I also understand that this application will be used by MacMurray College by faculty and administrative personnel for admission, financial aid, academic and counseling purposes.

\*\*I certify that the information provided on this application is correct and complete and that I will report any change in my status to the Office of Admission.

Signature

Date

Did You Remember To:

- Sign Application
- Request high school transcript
- Request ACT or SAT score (if desired; MacMurray is a test-optional college)
- Request college transcript from each institution attended (if applicable)
- Mail your completed application in the enclosed business reply envelope. (Or mail it separately to the address below.)

For Office Use Only

Date Received \_\_\_\_\_



Office of Admissions, 447 East College Avenue, Jacksonville, Illinois 62650-2590

MacMurray College shall not discriminate on the basis of race, sex, color, religion, national or ethnic origin, sexual orientation, or irrelevant physical condition in the administration of its educational policies, scholarships and loan programs, and athletic and other College-administered programs.