BACONE *COLLEGE*

APPLICATION FOR ADMISSION

Non-refundable Application Fee $25.00 must be received prior to processing.

2299 Old Bacone Road
Muskogee, OK 74403-1568
(918) 781-7395
FAX: (918) 781-7416

Email: admissions@bacone.edu Web Address www.bacone.edu

I plan to enter Bacone in the year 20_____ Fall_____ Spring _____ Summer_____

Ms.
Mr. _____
Mrs. First Name Middle Name Last Name Maiden

Anticipated Major at Bacone College _____

[ ] Freshman [ ] Sophomore [ ] Junior [ ] Senior [ ] Transfer

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Address:_____
Street or Rural Route/Box Number

_____ _____ _____
City State Zip

_____ _____
County Country

ADDRESS TYPE (***Check all that apply***)

[ ] Local [ ] Permanent [ ] Billing [ ] Parent [ ] Employer

Email Address: _____ Telephone: Home ( ) _____
Work ( ) _____
Message ( ) _____

Gender: [ ] Male [ ] Female Date of Birth_____/_____/_____
Month Day Year

Social Security Number _____ _____ _____

Are you a U.S. Veteran? [ ] Yes [ ] No Do you have any dependents? [ ] Yes [ ] No

Marital Status: [ ] Single [ ] Married Employment Status _____

Ethnic Background: ***This information is used for survey purposes and while it is <u>optional</u>, it is helpful***.

[ ] Asian [ ] African American [ ] Hispanic [ ] Non-Resident Alien [ ] White

[ ] Native American- Tribe_____ [ ] Other _____

Religious/Church Preference _____

PARENTS / EMERGENCY CONTACTS

Name_____ Name_____

Address_____ Address_____

_____ _____

Telephone Number (_____) _____ Telephone Number (_____) _____

Message Number (_____) _____ Message Number (_____) _____

Parents Marital Status_____ Do you live with a parent? [ ] Yes [ ] No

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CONSENT AND AUTHORIZATION

As a dependent student, I hereby authorize Bacone College, its officers, agents and employees to communicate orally and in writing with my parent(s) or guardians.

_____
Name of Parent/Guardian

I fully understand that I am waiving my right to object to the release and provision of all such information by reason of it being personal, privileged information or on any other grounds.

Dated this_____ day of _____, 20___ _____
Signature of Student

Are you a U. S. Citizen? [ ] Yes [ ] No Birth City _____

Birth State _____ Birth County _____

Birth Country_____ County of Residence _____

Have you ever graduated from college? [ ] Yes [ ] No

If you have previously attended a college, what is your highest degree completed? _____

Name of High School _____ Date of Graduation _____

Address of High School: Street/ Box Number _____

City _____ State _____

Zip _____ County _____ Country _____

Grade Point Average: _____ of _____ **OR** Projected Grade Point AVG _____

Class Rank _____ of _____ If not high school graduate, date of GED _____

ACT test date _____ Have your scores been sent to Bacone College? _____

ACT Scores: Composite_____ English _____ Math _____ Reading _____ Science Reasoning _____

SAT test date _____ Have your scores been sent to Bacone College? _____

SAT Scores: Verbal _____ Math _____ Combined _____

How did you hear about Bacone College? _____

Federal law allows the student to prohibit the releasing of public or "directory" information. If you wish the college to withhold this information, please indicate. **Yes**___ **No**___

Expected Enrollment Level: [ ] Full-time [ ] Part-time [ ] Special [ ] Concurrent

Do **both** of your parents have a four year degree? [ ] Yes [ ] No

Are you planning on living in campus housing? [ ] Yes [ ] No If yes, Please complete a Housing Application.

LIST **ALL** Colleges, Universities, or Vocational-Technical Institutes attended.

Name of College or University	City/State/Country	Dates Attended

If additional space is necessary, please attach a separate sheet of paper.

Have you ever applied or attended Bacone College? [ ] Yes [ ] No If yes, when _____

Have you ever been charged and/or convicted of a felony or a misdemeanor? [ ] Yes [ ] No

If yes, explain on a separate page or your application will not be processed.

DECLARATION OF THE STUDENT

If accepted, I agree to abide by the rules and regulations of Bacone College. I certify that all information provided is correct. False statements may result in immediate dismissal from Bacone College. I authorize the use of photographs and other select information for proper college purposes.

_____ _____

Signature of Applicant Date

Notice of Nondiscriminatory policy:

Bacone College admits students of either gender or any race, color, creed, religion, national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the college. It does not discriminate in administration of its educational policies, athletics, or other college programs.