

APPLICATION FOR ADMISSION

Please type or print in ink; complete all information.

A. PERSONAL INFORMATION

Name _____
Last First Middle

Home Phone _____ Work Phone _____ Cell Phone _____

Mailing Address _____
No. & Street, Box, Apartment #, etc.

City State Postal Code Country

Email _____

Citizenship _____ Resident Alien? Yes No

Birthdate ____/____/____ International Student? Yes No

Birthplace _____

Social Security Number ____-____-____ Eligible for V.A. Benefits? Yes No

Have you ever been:

- Suspended or expelled from school? Yes No
- Convicted of a criminal offense? Yes No

If "yes" to one or both questions, please attach a letter explaining the circumstances.

NOTICE OF NON-DISCRIMINATORY POLICY AS TO APPLYING STUDENTS:

Criswell College complies with all applicable federal and state non-discrimination laws, and does not engage in prohibited discrimination on the basis of race, color, nationality, ethnic origin, sex, age, or handicap. The following optional questions are asked for statistical reporting or accommodation purposes, not as factors of admissibility:

Ethnic Group: Black, non-Hispanic Asian or Pacific Islander American Indian or Alaskan Native Hispanic
 White, non-Hispanic Other _____

Gender: Male Female

Marital Status (check as many as apply)

Single Married ____/____/____ Separated Divorced Remarried Widow(er)

Note: If either you or your spouse have been divorced, please attach a letter explaining the circumstances.

B. EDUCATIONAL PLAN

Applying for admission as an: Undergraduate Graduate Non-degree Audit Sit-in Student

Have you made application to this college in the past? Yes No

If yes, did you enroll? Yes No If yes, when did you last attend? _____

Semester you plan to enter Criswell College: Fall 20____ January 20____ Spring 20____ Summer 20____

Expected Status: Full-Time Part-Time

MAIL TO: Criswell College • Office of Enrollment Services • 4010 Gaston Avenue • Dallas, TX 75246-1537 • admission@criswell.edu

(over)

Please note the program of study to which you seek admission:

UNDERGRADUATE

- Diploma
- Associate of Arts
- Bachelor of Arts
 - Primary Major: Biblical Studies
 - Second Major:
 - Counseling
 - Evangelism & Missions
 - Humanities
 - Pastoral Ministry
 - Worship Leadership
 - Youth Ministry
 - Youth Ministry
- Undecided/Non-Degree

GRADUATE

- Master of Arts
 - Christian Leadership
 - Educational Leadership
 - Spiritual Leadership
 - Jewish Studies
 - Ministry
 - Theological/Biblical Studies
 - Old Testament Track
 - New Testament Track
 - Philosophical Track
 - Systematic/Historical Track
- Interdisciplinary Track
- Undecided/Non-Degree
- Master of Divinity

C. FAMILY INFORMATION (Note: Adult learners do not need to complete this section, unless it applies.)

Living: Yes No

Living: Yes No

Name of Father or Legal Guardian _____

Name of Mother or Legal Guardian _____

Address: No. & Street, Box, Apartment #, etc. _____

Address: No. & Street, Box, Apartment #, etc. _____

City _____ State _____ Postal Code _____

City _____ State _____ Postal Code _____

Father's Occupation _____

Mother's Occupation _____

Employer _____

Employer _____

College Attended by Father _____ Degree(s) Earned _____

College Attended by Mother _____ Degree(s) Earned _____

D. EDUCATIONAL BACKGROUND

HIGH SCHOOL

High School _____ City _____ State _____ Date Graduated _____

If you did not graduate from high school, do you have a GED? Yes No If "yes," please send documentation.

Have you taken the SAT or ACT? Yes No
 If "yes," SAT Verbal _____ SAT Math _____ ACT Composite _____

Have you taken the GRE? Yes No
 If "yes," Verbal _____ Quantitative _____ Analytical _____

COLLEGE (List all schools attended in chronological order, from latest to earliest.)

Name of College/Institution	State	Major	Dates	Degree Conferred?	If so, what degree?
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

E. PLEASE INDICATE YOUR PRESENT CHURCH MEMBERSHIP

Name of Church _____ **Pastor** _____

Address _____

Street Address/P.O. Box _____

City _____ State _____ Postal Code _____ Country _____

Denominational Affiliation _____

Positions or Duties Performed (if applicable) _____

F. PLEASE NOTE HOW YOU BECAME INTERESTED IN CRISWELL COLLEGE

- Campus Visit
- Pastor or other minister
- Preview Day
- Other _____
- Media Advertisement: website • brochure/flier • catalogue • newspaper • radio (circle)
- High School Counselor
- Admissions Representative
- An Alumnus/ae (name) _____
- Current Student (name) _____

Please list the name and relationship of any family members who have attended Criswell College: _____

AGREEMENT

I certify that I have given full and complete information on this application to Criswell College, and that I have listed all schools and/or colleges I have attended. Furthermore, I acknowledge that I am requesting consideration for admission to a Christian college committed to the Lordship of Jesus Christ, and that if admitted, I pledge to conduct myself in accordance with the standards outlined in the Catalog and in the Student Handbook.

Signature _____

Date _____