

## **Application for Admission**

I am applying for (please circle only one):

Traditional Undergraduate	PackYourBa	gs 4+1 Pro	gram MyT	rinity Online	CMT	
I will be entering Trinity as a	a: Freshman	Transfer Student	Re-Appli	cant-Last attende	d in:	
Desired first semester of stu	udy: Fall of 20_	_ Spring o	of 20			
General Information	on					
Name (First and Last): Preferred First Name:						_
lave you ever used any other name(s)? If so, please list: Gender: Male						Female
Home Address:						
Numbe	er & Street	City	State	Zip		
Home Phone:	Cell Phone: _	l	Email:			
Date of Birth:	n: Social Security Number:					
Marital Status: Single	Married	Divorced	Widowed	Do you have	any children: _	
Are you a citizen of the Unit	ted States? Yes	No If no, ple	ease list your coun	ntry of citizenship:	·	
Are you a Veteran or Active	Duty? Yes	No				
	Stepfather		Spouse			
Name:	Pho	one:	Occupation:			
Address (if different from al	oove):					
Mother S	tepmother	Legal Guardian	Spouse			
Name:	Pho	one:	Occi	upation:		
Address (if different from al	oove):					
Is either parent a Trinity gra	iduate?	Father	Mother G	iraduate Year:		
Are any of your siblings cur	rently attending Tri	nity Bible College a	nd Graduate Scho	ool? Ye	es l	No
Name(s):						

<b>Educational In</b>	formation			
Please list the high school	from which you graduated a	nd all colleges you have attende	d beginning with the most recent.	
Name of School	City, State, Zip	Dates Attended	Graduation Date	Degree Earned
1				
2				
2				
3				
4				
Do you have a GED?	Yes No			
•		you taken the ACT or SAT	? Yes No ACT Sco	re: SAT Score:
Have you ever been	dismissed, suspended, o	or placed on probation in	college or high school?	
Academic?	Yes No	Disciplinary? Yes	No	
If yes, please	explain the circumstan	ces:		
Do you plan to apply	for financial assistance	?? Yes No	Do you plan to use Veter	rans' Benefits? Yes No
Desired Progra	•	r:		
Please note: This is no	ot a binding declaration	n of major / minor.		
	:		mination:	
•	l Christ follower? Yes	 5 No		
•			f yes, please circle below)	No
Alcohol	•	sed:	r yes, piedse enere selow,	
		other form) Date last use	ed:	
		prescribed for you by a m		Date last used:
	charged with or convict		Yes No Date of last offe	
	answered yes to any of	the above questions:		
Are you currently eng	gaging in consensual se	ex outside of marriage?	res No	
I hereby certify that all of t	the information provided in t	his application is true and accura	ate. I understand that any misrepres	entation of information on this applic
tion invalidates this applic	ation and is grounds for imm	nediate dismissal from Trinity at a	any time in the future.	
Signed:		Date	e:	_
If applicant is under the	e age of 18, a parent or leg	gal guardian must sign below	v.	
Signed (Parent or Leg	gal Guardian):		Date:	