



# 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: 501-279-4407  
FAX: 501-279-4129

APPLY ONLINE AT:  
WWW.HARDING.EDU

## Application for Undergraduate Admission

PLEASE SUBMIT WITH NON-REFUNDABLE APPLICATION FEE OF \$100

### Section I. Personal Information

PLEASE TYPE OR PRINT USING ALL CAPITAL LETTERS

LEGAL NAME: FAMILY NAME GIVEN NAME MIDDLE INITIAL

PREFERRED GIVEN NAME:  MALE  FEMALE MARRIED?  YES  NO

FULL ADDRESS: (WE CANNOT ACCEPT A P.O. BOX)

CITY & PROVINCE:

COUNTRY & POSTAL CODE:

E-MAIL ADDRESS: ARE YOU ON FACEBOOK?  YES  NO

TELEPHONE: COUNTRY CODE & NUMBER FAX NUMBER:

COUNTRY OF BIRTH: DATE OF BIRTH: MONTH, DAY, YEAR

CITIZEN OF: DO YOU PLAN ON OBTAINING A STUDENT VISA?  YES  NO

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

OCCUPATION: HARDING ALUMNUS:  YES  NO

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

OCCUPATION: HARDING ALUMNUS:  YES  NO

PARENTS E-MAIL ADDRESS: PARENTS TELEPHONE: COUNTRY CODE & NUMBER

YOUR RELIGIOUS PREFERENCE OR AFFILIATION: ARE YOU AN ACTIVE MEMBER?  YES  NO

PARENT(S) RELIGIOUS PREFERENCE OR AFFILIATION: ARE THEY ACTIVE MEMBERS?  YES  NO

WILL OTHER MEMBERS OF YOUR IMMEDIATE FAMILY BE IN THE UNITED STATES?  YES  NO

IF SO, WHO? WHERE?

BRIEFLY STATE YOUR REASONS FOR SELECTING HARDING UNIVERSITY AND INDICATE THE SOURCE FROM WHICH YOU INITIALLY LEARNED ABOUT HARDING.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OFFICE USE ONLY  
Admissions progress

Application Fee  
\$ \_\_\_\_\_  
PD \_\_\_\_\_

Tuition Deposit  
\$ \_\_\_\_\_  
PD \_\_\_\_\_

Housing Deposit  
\$ \_\_\_\_\_  
PD \_\_\_\_\_

Housing Form  
\_\_\_\_\_  
(sent to housing)

ACT/SAT  
ACT composite:  
\_\_\_\_\_  
SAT score:  
\_\_\_\_\_

Health Form  
 Academic Reference  
 Character Reference  
 H.S. Transcript  
  
 College Transcript  
(1st) \_\_\_\_\_  
 College Transcript  
(2nd) \_\_\_\_\_



## Section II. Education

LIST IN ORDER (BEGINNING WITH YOUR SECONDARY SCHOOL) ALL SCHOOLS AND UNIVERSITIES YOU HAVE ATTENDED. INCLUDE THE INSTITUTION YOU MAY PRESENTLY BE ATTENDING. GIVE DEGREES, CERTIFICATES, DIPLOMAS OR PROFESSIONAL TITLES AWARDED (BEGINNING WITH MATRICULATION EXAMINATION OR ITS EQUIVALENT) AS OFFICIALLY DESIGNATED IN THE COUNTRY OF ISSUE.

NAME OF SCHOOL	LOCATION	DATES ATTENDED	DEGREES OR DIPLOMA
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WHAT IS YOUR NATIVE LANGUAGE? \_\_\_\_\_

IF OTHER THAN ENGLISH, HAVE YOU TAKEN THE **TEST OF ENGLISH AS A FOREIGN LANGUAGE** (TOEFL)?  YES  NO

IF NO, WHEN DO YOU PLAN TO TAKE IT? \_\_\_\_\_

IF YES, HAVE YOUR SCORES BEEN SENT TO HARDING UNIVERSITY?  YES  NO

YEARS OF INSTRUCTION THROUGH THE MEDIUM OF ENGLISH (GIVE DATES) \_\_\_\_\_

WHERE WAS INSTRUCTION GIVEN? \_\_\_\_\_

DO YOU PLAN TO EARN A BACCALAUREATE (FOUR-YEAR) DEGREE AT HARDING?  YES  NO

WHAT COURSE OF STUDY (MAJOR) DO YOU PLAN TO PURSUE? \_\_\_\_\_

WHEN DO YOU WISH TO BEGIN YOUR STUDY HERE? MONTH \_\_\_\_\_ YEAR? 20 \_\_\_\_\_

HOW MANY YEARS DO YOU PLAN TO REMAIN A STUDENT AT HARDING? \_\_\_\_\_

DO YOU PLAN TO TRANSFER TO ANOTHER EDUCATIONAL INSTITUTION UPON COMPLETION OF YOUR WORK HERE?  YES  NO

## Section III. Financial Information

PLEASE EXPLAIN HOW YOU WILL PAY FOR SCHOOL EXPENSES OVER THE NEXT FOUR YEARS: \_\_\_\_\_

\_\_\_\_\_

HOW WILL YOU PAY FOR YOUR TRANSPORTATION TO THE UNITED STATES? \_\_\_\_\_

HOW WILL YOU PAY FOR RETURN TRANSPORTATION? \_\_\_\_\_

IN CASE OF EMERGENCY, ARE THERE SOURCES FOR ADDITIONAL FUNDS AVAILABLE TO YOU ONCE YOU ARRIVE IN THE UNITED STATES?  YES  NO

IF YES, GIVE SOURCES AND AMOUNTS \_\_\_\_\_

DOES YOUR GOVERNMENT RESTRICT THE EXCHANGE AND RELEASE OF FUNDS FOR STUDY IN THE UNITED STATES?  YES  NO

IF YES, DESCRIBE THE RESTRICTIONS AND EXPLAIN HOW YOU WILL COPE WITH THIS MATTER. \_\_\_\_\_

\_\_\_\_\_

**NOTE: IF YOUR PRIMARY FINANCIAL SUPPORT IS BEING PROVIDED BY A GROUP, ORGANIZATION, OR INDIVIDUAL OUTSIDE YOUR IMMEDIATE FAMILY, IT WILL BE NECESSARY TO PLACE CERTIFIED PAPERS ON FILE GIVING COMPLETE DOCUMENTATION OF THIS SUPPORT.**

## Section V. Please Read and Sign

**I CERTIFY THAT THE STATEMENTS ON THIS FORM ARE TRUE. FURTHERMORE, IF ADMITTED, I WILL COMPLY WITH ALL RULES AND REGULATIONS SET FORTH BY OFFICIALS OF HARDING UNIVERSITY.**

X

SIGNATURE OF APPLICANT

DATE

PLEASE RETURN TO:  
**HARDING UNIVERSITY**  
**OFFICE OF ADMISSIONS SERVICES**  
**BOX 12255, 915 E. MARKET AVE.**  
**SEARCY, AR 72149-2255**  
**FAX: 501-279-4129**

FOR MORE INFORMATION GO TO [WWW.HARDING.EDU](http://WWW.HARDING.EDU) OR CALL ADMISSIONS SERVICES AT **501-279-4407**

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.