



APPLICATION PACKET

William Carey University

Office of Admissions: Application Instructions Checklist

International Student

- Completed and signed application for undergraduate admissions
- \$40 non-refundable application fee
- Official ACT or SAT scores
- Official TOEFL or Michigan Level exam scores, if applicable
- Official and final transcripts from each institution previously attended, with official English translations included*
- Completed and signed certification of finances showing official proof of financial support
- Proof of measles, mumps, and rubella (MMR) immunizations**
- \$500 advance tuition

* An official transcript is one that has been mailed directly from the institution to William Carey University.

**You should have one MMR in the last 10 years or two over the course of your life if you were born after January 1, 1957.

Do You Have Questions?

Hattiesburg Campus

601.318.6103

Fax: 601.318.6765

1.800.962.5991

admissions@wmcarey.edu

William Carey University Application for Undergraduate Admissions

Social Security Number, if applicable _____-_____-_____ Date of Birth _____
Month/Day/Year

Last Name First Name Middle Name Preferred Name

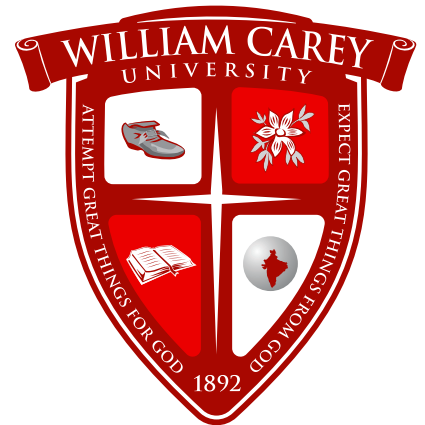
Permanent Mailing Address

City State/Province Zip/Postal Code

County or Parish, if applicable Country

Home Telephone Cellular Telephone

E-Mail Address



ENROLLMENT INFORMATION

Probable Major (See list of majors on last page) _____

Entrance Term Fall Winter Spring Summer Academic Year 20____

Have you attended William Carey in the past? Yes No What term(s)? _____

INTERNATIONAL INFORMATION

Country of Birth _____ Country of Citizenship _____

Native Language _____ Languages Spoken _____

HIGH SCHOOL INFORMATION

Last High School Attended _____

High School Counselor's Name _____ Counselor's Phone Number _____

Have you taken the ACT? Yes No

ACT Scores (Composite) _____ Date Taken (Month/Year) _____

Have you taken the SAT? Yes No

SAT Scores (Critical Reading + Math) _____ Date Taken (Month/Year) _____

Date of High School Graduation (Month/Day/Year) _____

COLLEGE INFORMATION

Your initials are required to indicate that you have read this statement _____.

Please list all colleges and/or universities attended in order of attendance. (This includes dual enrollment classwork). **If no colleges were previously attended, mark the first space "none."** An official transcript from each college is required. Failure to disclose all institutions attended at the time the application is submitted will result in a recalculation of your transfer grade point average and could result in loss of credit, disciplinary action, or cancellation of your enrollment.

_____	_____	_____	_____	_____
Name of College/University	City	State	Country	Dates of attendance
_____	_____	_____	_____	_____
Name of College/University	City	State	Country	Dates of attendance
_____	_____	_____	_____	_____
Name of College/University	City	State	Country	Dates of attendance

STATISTICAL INFORMATION

(Used only for statistical reporting)

Gender: Male Female

Special Needs: No Yes Please describe _____

Ethnic Background: American Indian or Alaskan Native Asian/Pacific Islander

Black/Non-Hispanic White/Non-Hispanic

Hispanic Other _____

MISCELLANEOUS

Have you ever been convicted or pled guilty to a crime (other than minor traffic violations)?

No Yes If yes, explain (attach additional sheet if necessary) _____

Have you ever been suspended or expelled from another institution?

No Yes If yes, explain (attach additional sheet if necessary) _____

FAMILY INFORMATION

Guardian* Father Mother Other _____

Last Name First Name Middle Name Preferred Name

Permanent Mailing Address

City State/Province Zip/Postal Code

County or Parish, if applicable Country

Home Telephone Cellular Telephone Work Telephone

E-Mail Address

Please list the names of any family members who attended William Carey.

Name while at Carey Relationship to You Approximate Dates Attended

Name while at Carey Relationship to You Approximate Dates Attended

Name while at Carey Relationship to You Approximate Dates Attended

**Optional for those 25 years of age or older*

EMERGENCY CONTACT (other than parent or spouse)

Last Name First Name Middle Initial

Relationship to you Home Telephone Cellular Telephone

E-mail Address

RELIGIOUS BACKGROUND

Denomination Southern Baptist Other Baptist Presbyterian Catholic Methodist
 Other (please list) _____

Home Church _____
Name City State Country

If you are a dependent of a Southern Baptist minister, home missionary, or foreign missionary, please list your

Parent Minister Name(s) _____ Job Title _____

Home Church _____
Name City State Country

ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY AND INTEGRITY:

For value received during the length of my study at William Carey University, I, the undersigned, agree to accept responsibility for any indebtedness incurred to William Carey University. I understand that this instrument shall remain in effect throughout the course of my academic study at William Carey University. Demand, presentment, protest, notice of protest, and notice of disclosure are hereby waived. In the event of default in the payment of any indebtedness, time being of the essence of this instrument, the holder of this agreement, without notice or demand, may declare the entire principal sum, then unpaid, immediately due and payable. In addition, upon default, the holder may terminate the maker's enrollment at William Carey University. The failure of the holder to declare the entire principal sum due and payable on default or terminate the maker's enrollment shall not be deemed a waiver of its right to do so.

In the event that a collection agency must be contracted to assist with the collection of any outstanding balance, or in the event that any suit is commenced to enforce payment of the agreement, the undersigned agrees to pay all costs of collection including agency costs, court costs, and such additional sums of attorney fees as the court in such action may adjudge reasonable. This note shall be governed by and construed in accordance with the laws of the State of Mississippi.

I understand that William Carey University prohibits its students from using, possessing, and distributing or causing the use, possession, or distribution of alcohol and illegal drugs on campus, at any university-related, sponsored, or recognized activity, whether on or off campus, and off campus in a student's university residence.

I consider this application my agreement to cooperate with the university and to conduct myself in accordance with established rules of the university as found in the official publications of the institution. I certify that all information provided in this application is true, complete, and correct.

Student's Signature

Date (Month/Day/Year)

All single students under the age of 21 whose primary residence (parent's/guardian's home) is more than 50 miles from the university are required to live on campus.

Equal Educational Opportunities Statement: In compliance with federal law, including provisions of Section 504 of the Rehabilitation Act of 1973 and Title IX of the Education Amendments of 1972, William Carey University does not illegally discriminate on the basis of race, color, national origin, sex, age, or disability in admissions or in the administration of its education policies, programs, and activities.