

Ouachita Baptist University

Application for Admission

Complete and send this application for admission, along with a \$150 deposit (housing & enrollment), an official transcript (and a final one after graduation), ACT or SAT scores, and two recent photographs (for student files), to the Office of the Registrar, Ouachita Baptist University, Box 3757, Arkadelphia, Arkansas, 71998-0001. An online application is available at www.obu.edu.

1. This application is for: Year 20 _____ Fall Spring Summer I Summer II
2. I am applying as a: Freshman Transfer Student Are you a US citizen or Permanent resident
3. Have you ever attended or applied to Ouachita? Yes No If yes, list year: _____ Yes No

Personal Information

4. Social Security Number (required for US citizen) _____ Date of Birth _____ Male Female
5. Legal Name _____
Last First Middle Preferred Maiden (if applicable)
6. Present Mailing Address _____
Number, Street or P.O. Box City State ZIP Country
7. Telephone _____ Cell _____ Email Address _____
8. Ethnicity: Are you of Hispanic or Latino ethnicity? Yes No
Indicate if you are from one or more of the following races.
 White Black American Indian / Alaska Native Asian Native Hawaiian / Other Pacific Islander
9. Marital Status: Single Married Divorced Widowed
10. International Student: Country of Citizenship _____ Country of Birth _____
11. Missionary Child: IMB Other Country of Service _____
12. Religious Preference _____ Home Church _____

Educational Information

13. Last High School Attended _____ High School Graduation Year _____
14. Type of High School: Public Private Home School
15. Class Rank _____ Class Size _____ Grade Point Average _____ ACT/SAT Score _____
16. List in chronological order all colleges and universities which you have attended since high school. Please request that each institution send an official transcript to the Office of the Registrar (Box 3757).

Name of College	City	State	Dates Enrolled	No. of Hours
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17. Have you ever been suspended from another college or university? Yes No
If yes, please tell what school and when _____ Are you eligible to return? Yes No
18. Have you ever been arrested, charged, or convicted of a criminal offense of any nature? Yes No
If so, please provide specific details of each occurrence. Attach descriptions if necessary.

Areas of Interest

19. Possible Academic Major _____ Possible Career Choice _____

College Information

20. (optional) Please list other colleges and universities to which you have applied or plan to apply: _____
21. What factors influenced your decision to apply to Ouachita? _____
22. Please list names of Ouachita students you know: _____

Family Information

23. Primary Contact Mr. Rev. Ms. Dr. Mrs. _____
Name Occupation/Employer
24. Home Address _____
No., Street, P.O. Box City State ZIP
25. Home Phone _____ Cell _____ Work _____
26. Email Address _____ Relationship _____
27. Secondary Contact Mr. Rev. Ms. Dr. Mrs. _____
Name Occupation/Employer
28. Home Address _____
No., Street, P.O. Box City State ZIP
29. Home Phone _____ Cell _____ Work _____
30. Email Address _____ Relationship _____

Family Information (cont'd)

31. (optional) Did either of your parents graduate from a four-year institution of higher education? Yes No

32. (optional) Please provide the names/ages of school age siblings:

Name	Age/Grade in School

33. Please list relatives who have attended Ouachita:

Name	Dates attended	Relationship

Campus Life Information

34. Ouachita maintains a long-standing tradition of residential housing for full-time students. The university believes that this tradition helps foster a community of learning both inside and outside the classroom. University policy requires unmarried students younger than 22 to live in campus housing unless they have plans to live with a parent/guardian and commute daily. To be eligible for institutional aid, student must live in university housing.

- I will be living on campus.
- I will be commuting based on the above statement.

35. Do you have a roommate preference, please give name, address, and phone number. _____

36. If not, what type of a person do you prefer for a roommate? _____

Priority in housing assignments is determined by the date the application is received and validated through payment of the \$150 deposit. The deposit will be refunded if written cancellation is received prior to June 1 for the fall semester and December 1 for the spring semester. For those applying after June 1 or December 1, the deposit is non-refundable.

Résumé Information

37. School Activities/Leadership Positions:

Year	Activity	Offices Held	Year	Activity	Offices Held

38. Academic Honors and Awards Received:

39. Church/Community Service Activities:

40. Peer References (please list the names and contact information of two fellow students):

Name	Address	Home Phone	Cell	Email
1. _____				
2. _____				

Signature Required

I hereby affirm that all information in this application is complete and accurate. I understand that I will not be considered for admission to Ouachita Baptist University until I have submitted all specified credentials. I understand that withholding or giving false or misleading information may make me ineligible for admission and enrollment. By signing this statement, I agree that upon enrollment at Ouachita Baptist University, I will adhere to all University standards, including those set forth in the University catalog and the Tiger Handbook.

- I give my high school permission to release my transcript to Ouachita Baptist University.

Signature _____ Date _____