

APPLICATION *for* ADMISSION



INSTRUCTIONS



To all applicants for **ADMISSION**

1. Apply online at www.lrc.edu or complete and return this application to Lenoir-Rhyne College, Office of Admissions and Financial Aid, Campus Box 7227, Hickory, North Carolina, 28603.
2. Attach a \$35 non-refundable application fee to your application.*

Freshmen

Applicants for Freshman Admission must also complete the following steps:

1. Ask your guidance counselor to forward a copy of your high school transcript. Be sure that a list of senior courses, test scores, and rank in class (if applicable) is included.
2. All candidates for admission to the freshman class are required to take the SAT (Scholastic Aptitude Test) or the ACT. Candidates should take these examinations in the spring of their junior year and/or in the fall of their senior year. (L-R's SAT code is 5365. Our ACT code is 3118.)
3. Upon high school graduation, a final transcript must be forwarded to the Office of Admissions and Financial Aid.

Transfers/Evening

Applicants for Transfer Admission must complete the following steps:

1. Have transcripts of ALL college work sent to the Office of Admissions and Financial Aid.
2. Have a copy of your high school record and SAT or ACT scores forwarded to the Office of Admissions and Financial Aid if you have not completed 30 semester hours or 45 quarter hours of college work.

Re-entry

Re-entry candidates should follow step 1 for Transfers. In some situations, an additional form may be required. Please consult an admissions counselor.

* *Re-entry candidates are not required to include the \$35 processing fee.*

For Additional Information:

Lenoir-Rhyne College
Office of Admissions and Financial Aid
Campus Box 7227
Hickory, North Carolina 28603
1 800 277 5721 or 828 328 7300
admission@lrc.edu
www.lrc.edu

APPLICATION *for* ADMISSION

★ Undergraduate Programs ★

(Please check one option in each section.)

<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year of entrance to L-R _____	<input type="checkbox"/> High School Enrichment <input type="checkbox"/> Freshman <input type="checkbox"/> Transfer <input type="checkbox"/> Re-entry	<input type="checkbox"/> Degree seeking <input type="checkbox"/> Special non-degree seeking <input type="checkbox"/> Audit class (no transferable credit)	<input type="checkbox"/> Full-time (12 or more credits per semester) <input type="checkbox"/> Three-quarter-time (9-11 credits per semester) <input type="checkbox"/> Half-time (6-8 credits per semester)	<input type="checkbox"/> Day Program <input type="checkbox"/> Evening College
<input type="checkbox"/> Boarding <input type="checkbox"/> Non-boarding <input type="checkbox"/> Non-boarding with parents				



Personal Information *(Print in ink or type)*

Full Name _____ Preferred Name _____
First Middle Last

Maiden Name _____ Sex _____ Social Security No. _____ - _____ - _____

Mailing Address _____
Number and Street

_____ City _____ State _____ Zip Code _____ Country

Home Telephone (_____) _____ - _____ E-mail Address _____

IM (Instant Messenger) Address _____ Service AOL MSN Other _____

Current Place of Employment _____ Work Telephone (_____) _____ - _____

Anticipated Major _____



Education

List the high schools you have attended. *(Have official transcripts from all schools attended forwarded to the L-R Office of Admissions.)*

Name of Institution	Address	Dates Attended	CEEB Code
_____	_____	_____ to _____	_____
_____	_____	_____ to _____	_____
_____	_____	_____ to _____	_____

High School Telephone (_____) _____ - _____ Counselor's Name _____

Have you taken the SAT or ACT? Yes No If yes, your testing date was ____/____/____ (SAT), ____/____/____ (ACT) Future testing date is ____/____/____ (SAT), ____/____/____ (ACT)

I certify that I did/will graduate from the above-listed high school on ____/____/____ (m) (d) (y). Signed _____

List the colleges/universities you have attended. *(Have official transcripts from all schools attended forwarded to the L-R Office of Admissions.)*

Name of Institution	Address	Dates Attended	CEEB Code
_____	_____	_____ to _____	_____
_____	_____	_____ to _____	_____

Are you eligible to return to your last school? Yes No If no, give reason _____

This will be my second bachelor's degree Yes No Are you currently a member of Phi Theta Kappa? Yes No

Are you planning a career in theology, Christian education, the ministry, or full-time church work? Yes No



Extracurricular Activities/Honors List activities, honors, or distinctions from grades 9-12. *(Use additional page(s) if necessary.)*

Do you plan to participate in any intercollegiate sports? Yes No If yes, what sport(s)? _____

The following information is used for statistical purposes.*

**Responses to questions regarding race, national origin, and ethnic heritage are optional. Questions regarding citizenship must be answered. Information gathered will be used only for statistical purposes and will not be used in any discriminatory manner.*

Date of Birth _____ / _____ / _____ Marital Status _____

How would you describe yourself?

- ☆ White, Anglo, Caucasian
- ☆ African-American (Non-Hispanic)
- ☆ Hispanic
- ☆ Native American
- ☆ Asian
- ☆ Other _____

Please indicate the primary ethnic heritage of your family _____

Are you a United States citizen? ☆ Yes ☆ No If no, of what country are you a citizen? _____

If no, are you a legal resident of the U.S.? _____ Resident Number _____

If you do not have a resident number, please identify your current visa and its expiration date _____

Are you a North Carolina resident? ☆ Yes ☆ No If yes, for how long? _____ What county? _____

If you are a church member, please give the denomination, church, and pastor's name

Denomination	Congregation	Pastor
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If Lutheran, please check one ☆ ELCA ☆ LCMS ☆ Wisconsin ☆ Other _____



Note: Failure to fully answer questions 1-4 will delay the processing of your application.

- 1. Have you been convicted of a criminal offense other than a minor traffic violation? ☆ Yes ☆ No
- 2. Are there such criminal charges pending against you at this time? ☆ Yes ☆ No
- 3. Have you ever been dismissed, suspended or placed on probation for disciplinary reasons by any high school or college? ☆ Yes ☆ No
- 4. Have you ever been dismissed, suspended or placed on probation for academic reasons by any high school or college? ☆ Yes ☆ No

(If you answered yes to any of the four questions above, please explain the circumstances on a separate sheet.)



Family Background

Father's Name _____ Telephone (_____) _____ - _____

Name of College Attended/Degree _____ E-mail Address _____

Occupation _____ Employer _____ Business Phone (_____) _____ - _____

Mother's Name _____ Telephone (_____) _____ - _____

Name of College Attended/Degree _____ E-mail Address _____

Occupation _____ Employer _____ Business Phone (_____) _____ - _____

List name and academic class of siblings who are currently full-time, boarding or day students in a first-degree program at Lenoir-Rhyne

List name, academic class and relation of immediate relatives who are Lenoir-Rhyne graduates _____

Have you ever been a resident of Sipes Orchard Home? ☆ Yes ☆ No Hometown newspaper _____

Are you a member of the Girl Scouts of America or the Boy Scouts of America? ☆ Yes ☆ No

If yes, what is your Troop Number? _____ Are you a GSA Gold Award winner or BSA Eagle Scout? ☆ Yes ☆ No

Please list the other colleges/universities to which you are applying _____

How did you first become interested in L-R? ☆ College Fair ☆ High School Visit ☆ Guidance Counselor ☆ Mailing
 ☆ Alumni ☆ Friend ☆ Other _____

I certify that all information given in this application is complete and accurate. If admitted to Lenoir-Rhyne College, I agree to abide by the established regulations of the College and the Student Government Association. I agree to accept the obligation imposed upon me by the Honor Code. I am voluntarily providing my social security number for official use only.

Signature of Applicant _____ Date _____ / _____ / _____

SCHOOL REPORT FORM

Students should complete the front of this form and then submit it to their high school guidance or counseling office. Your counselor will complete the form, and then submit it to the Lenoir-Rhyne Office of Admissions and Financial Aid.



(Applicant)

Student Name

First Middle Last Jr.

Social Security No. _____ - _____ - _____

Please list your current academic year courses by subject area and during which term each will be taken (fall or spring semester, etc.). Winter is listed for those students who attend schools with trimester systems. Identify the level at which each course is being taken (Honors/Gifted & Talented, Advanced Placement, International Baccalaureate, Standard/Regular).



English

Fall _____

Winter _____

Spring _____

Science

Fall _____

Winter _____

Spring _____

Mathematics

Fall _____

Winter _____

Spring _____

Fine Arts

Fall _____

Winter _____

Spring _____

History

Fall _____

Winter _____

Spring _____

Electives

Fall _____

Winter _____

Spring _____

Foreign Language

Fall _____

Winter _____

Spring _____

Other

Fall _____

Winter _____

Spring _____

Counselors: Please complete this form (use other side).

(Counselor)

Please attach the applicant's official transcript, including courses in progress, and respond to the issues in each section of this form. Include, if possible, a school profile and transcript legend.

Please note: If in lieu of completing this section you refer us to your profile, please make sure that the profile responds to each of these questions.



The candidate has a cumulative grade point average of _____ on a scale of _____.

The GPA is _____ weighted _____ unweighted.

Please respond to ONE of the following statements about class rank:

- 1. This candidate ranks _____ in a class of _____ students.
- 2. The school does not rank. _____

In comparison to other college preparatory students at this school, the applicant's course selection is:

☆ Most Demanding ☆ Very Demanding ☆ Demanding ☆ Average ☆ Less Than Average

Our high school's highest level/most rigorous courses are:

☆ IB – International Baccalaureate ☆ AP – Advanced Placement ☆ H – Honors ☆ Other _____

Our school calendar operates on the:

☆ Semester system ☆ Trimester system ☆ Block scheduling ☆ Other, please explain _____

_____ percent of the high school's graduates attend a four-year college/university.



Please indicate the high school's grading system.

Numerical equivalent of letter grades (i.e., A=93-100, B=85-92, etc.)

A=_____ B=_____ C=_____ D=_____ F=_____

Counselor's Name _____
First Last

Title _____ School _____

School Address _____

Office Telephone (_____) _____ - _____ Office Fax (_____) _____ - _____

Counselor's E-mail Address (if available) _____

School CEEB Code _____

Counselor's Signature _____

Lenoir-Rhyne College admits qualified students in all programs regardless of race, creed, handicap, or gender.

