



APPLICATION FOR ADMISSION

A \$25 application fee is required with this application. Please fill out carefully and furnish complete information. ***Failure to complete in entirety will result in processing delay!*** Former MHC Student (application fee not applicable)

Name _____ Preferred Name _____
Last First Middle Maiden

Permanent Mailing Address _____
Street or Route

City _____ County _____ State _____ Zip _____

Home Telephone _____ Work Telephone _____ Date of Birth _____

Employer _____

Social Security # _____ E-mail _____

(I am voluntarily providing my social security # on this form with the understanding it will be used only for this institution's record keeping and data processing operations and for official enrollment reporting.)

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

U.S. Citizen Yes No Nation of Citizenship _____
 Green Card Degree Seeking Student Exchange/Scholar

Will you have been a legal resident of North Carolina for a period of at least 12 months immediately prior to the date of registration at Mars Hill? Yes No If no, please list the beginning date of your residency. _____

Veteran Yes No Branch of Service _____

The following optional information is requested for statistical purposes only.

Ethnic Origin: African-American Native American Asian
 Caucasian Hispanic Other _____

Gender: Female Male Marital Status _____ Religious Affiliation _____
(Denomination)

List any health factors or special needs that should be called to our attention: _____

REGISTRATION INFORMATION

Applying for: FALL _____ August/ October SPRING _____ January/ March SUMMER _____ June/ July

Applying as: Former MHC Student High School Graduate GED Graduate
 Transfer Student Post-Graduate Self-Improvement

Site: Asheville Burnsville Clyde/Waynesville Hendersonville Marion Mars Hill

EDUCATIONAL DATA

High School Attended _____ Location _____ Graduation Year _____

If you have previously attended Mars Hill College, please list years and name used while enrolled. _____

College Attended: _____ Year(s) Attended _____

College Attended: _____ Year(s) Attended _____

College Attended: _____ Year(s) Attended _____

College Degree(s) Held _____

Note: It is your responsibility to have all official high school and college transcripts and other required forms forwarded to the Adult ACCESS Office at Mars Hill College.

MARS HILL INFORMATION

What is your anticipated major?

- Business Management Social Work Special Education Undecided
- Elementary Education Middle Grades - (Concentrations _____)

(This section applies ONLY to post-graduates seeking licensure)

Do you hold current North Carolina teacher licensure?

- Yes, Licensure area: _____ No

Are you seeking: Add-on Licensure in: AIG Reading Specialist ESL Special Education
 or Teacher Renewal Lateral Entry (through RALC) Licensure

If you do not hold current North Carolina teacher licensure, what licensure area are you seeking?

- Elementary (K-6) Middle Grades (6-9)** Secondary (9-12)** Special Education ESL

**Concentration/content area _____

How did you learn about the Adult ACCESS Program?

- Television Employer Friend _____
- Mailing Education Fair Student Referral _____
- Newspaper Radio Website Other _____

I hereby certify that all information given in this application is complete and accurate.

Date _____ Signature of Applicant _____

Mars Hill College, like many colleges and universities across the United States, is very concerned about protecting our students, faculty, and staff in the event of an emergency or crisis, whether it is a man-made or natural disaster. The College has developed an emergency management team and policies to follow in the event of an emergency or crisis in our college community. "Contact Now" is the College's emergency notification system.

CONTACT NOW EMERGENCY INFORMATION

My cell phone # _____

Emergency Contact Name (parent/family member) _____

Relationship _____ Emergency Contact's Cell Phone # _____

I understand that Mars Hill College will use my personal cell phone number and other information in conjunction with the campus emergency management system, "Contact Now." I understand that this information will be used exclusively for emergency and other priority notifications by the college. I understand that if I refuse to provide my contact information, I cannot be notified in case of emergency or crisis on campus.

- I do not have a cell phone for use in notification of an emergency or crisis on campus.

Student Signature _____

CHECKLIST: Please make sure all requirements are processed or sent!

1. Application
2. \$25 Application Fee
3. Official High School Transcript(s) and GED Scores (if applicable)
4. Official College Transcript(s)

COMPLETED APPLICATION AND FEE SHOULD BE MAILED TO:

**Adult ACCESS Program
 Mars Hill College
 Box 6682, Mars Hill, NC 28754**

Mars Hill College does not discriminate on the basis of race, sex, religion, creed or handicap in the operation of any aspect of the college.

*Mars Hill College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools
 National Council for Accreditation of Teacher Education
 Council on Social Work Education*