

HENDERSON CHRISTIAN UNIVERSITY

UNIVERSITY IS OFFERING A WIDE RANGE OF UNDERGRADUATE AND GRADUATE DEGREES

APPLICATION FOR ADMISSIONS

1. Carefully complete all forms in the application package. Please type or print.
2. Attach two a recent photo of yourself if single, your family if married.
3. Include application fee. \$295,

GENERAL INFORMATION

I am applying for admission as follows:

Freshman Transfer Special E.S.L.

Term : Fall Spring Summer Winter Year : _____

I am applying for program :

Bachelor Master Doctor Honor Degree for Doctor

I am presently interested in the following major :

Religious Education Theology Divinity Ministry Christian Counseling

Christian Welfare Philosophy in Religious Education Oriental Health in Ministry

Undecided

PERSONAL INFORMATION

Legal Name _____ Sex 'M' 'F'

Last First Middle/Maiden

Mailing Address _____

Street _____

City _____

State _____

Zip _____

Home Phone (____) _____

Email Address : _____

Social Security Number _____

Birth Date _____

/

/

Place of Birth _____

City _____

State _____

Country _____

Are you a U.S. Citizenship? Yes No If not, do you have a student visa? Yes No

Country of Citizenship _____

Marital Status (Check all that apply)

Never Married Married Widow/widower Single Parent

Remarried Separated Divorced

Name of Spouse _____

Name(s) and Age(s) of Children _____

40-38 78th street, Elmhurst, N.Y. 11373 www.hendersonny.org E-Mail : info@hendersonny.org

General Office 718-593-7965, Admission 718-810-3248, Fax 718-440-9201

PARENT/GUARDIAN INFORMATION

Name of Parent or Guardian _____
Occupation _____ Phone () _____
Address _____
Street _____
City _____ State _____ Zip _____
Name of Mother (include address if different) _____
Name(s) and Age(s) of Brother(s) or Sister(S) _____

ACADEMIC INFORMATION

Which school you graduated or anticipate graduation.
(Please have transcripts sent to Henderson Christian University)
Address _____
Street _____ City _____ State _____ Zip _____
Address _____
Street _____ City _____ State _____ Zip _____
Date if graduation or anticipated graduation _____ / _____ / _____
Did you take a GED? Yes No Date _____ / _____ / _____
When did you take the ACT? _____ / _____ / _____ SAT? _____ / _____ / _____
TOEFL _____ / _____ / _____
Have your scores been sent to Henderson C. University? Yes No
List any High School, Institutions and University attended. (Please have original transcripts sent to Henderson C. University.)
Have you ever been denied enrollment by a school/university? Yes No
Were you ever suspended or expelled by any school/university? Yes No
Do you have any outstanding University financial obligations? Yes No
If yes to any these questions, please explain on a separate sheet of paper.

PAST HISTORY

Do you now use or have you used in the past year Tobacco? Yes No Drugs? Yes No
Alcoholic beverages? Yes No
Have you ever been arrested? Yes No Convicted Yes No
Placed on probation? Yes No
If yes to any these questions, please explain on a separate sheet of paper.

Henderson Christian University admit students of any race, color, national or ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the university. It does not discriminate on the basis of race, color, national or ethnic origin in the administration policies, athletic and other university-administered programs.

SPIRITUAL INFORMATION

When did you accept Jesus Christ as your personal Saviour? _____			
Are you a church member? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you attend church regularly? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Home church membership _____			
Pastor's Name _____			
Address _____			
Street	City	State	Zip
Are your parent(s) in full-time Christian Service? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please list below.)			
Name _____		Phone (____) _____	
Name of Ministry _____			
Address _____			
Street	City	State	Zip

SALVATION EXPERIENCE

Please give a brief statement of your Salvation, call to Christian Service, and future plans.

RECOMMENDATIONS

List adults who are well acquainted with you. No relatives.			
Pastor _____		Phone (____) _____	
Address _____			
Street	City	State	Zip
Friend _____		Phone (____) _____	
Address _____			
Street	City	State	Zip
Friend _____		Phone (____) _____	
Address _____			
Street	City	State	Zip

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I agree to abide Henderson Christian University regulations with the understanding that failure to cooperate in maintaining these regulations will lead to appropriate disciplinary action and/or possible dismissal.

Applicant's Signature _____ Date _____

Please print name _____

Parent or guardian's Signature _____ Date _____

Please Print Name _____

Please return application and \$295 application fee to :

pay to : Henderson Christian Seminary

Henderson C. Seminary / Admissions Office

40-38 78th street

Elmhurst, NY, 11373

E-Mail : info@hendersonny.org

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How did you become interested in attending Henderson C. University? _____

Are you employed? Yes No

By Whom? _____ Phone (_____) _____

Street _____ City _____ State _____ Zip _____

Do you have a friend who would be interested in receiving information about Henderson C. University?

Name _____ Phone (_____) _____

Street _____ City _____ State _____ Zip _____

Year your friend will/did graduate from high school. Year _____

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