Summer Scholars Program Application

A $50 application fee MUST accompany the application.

PERSONAL INFORMATION

Last name_____ First _____ Middle _____ Preferred name_____

Address (Street, R.R. or Box) _____ City _____ State _____ Zip _____

Cell phone (_____) _____ Gender ❑ Male ❑ Female

Date of birth _____ Social Security Number _____ E-mail

Church name _____ Phone _____

Address _____

Denomination _____ Pastor _____

In order to fulfill our reporting obligations to the federal government, we collect the following information on student ethnic, racial and national origins.

Which of the following best describes your current citizenship? ❑ U.S. Citizen ❑ Resident Alien ❑ Nonresident Alien ❑ Dual Citizenship

Which of the following best describes your ethnic heritage? ❑ Hispanic or Latino ❑ Not Hispanic or Latino

Select one or more of the following racial categories that apply to you. ❑ American Indian or Alaska Native ❑ Asian ❑ Black or African American ❑ White ❑ Native Hawaiian or Other Pacific Islander

FAMILY INFORMATION

Father's or legal guardian's full name _____ Mother's full name_____

Address (if other than yours)_____ Address (if other than yours) _____

_____ _____

Living? ❑ Yes ❑ No _____ Living? ❑ Yes ❑ No

Home phone (_____) _____ Home phone (_____) _____

Did your parents or grandparents attend Indiana Wesleyan University? ❑ Yes ❑ No

Did (or do) your siblings attend Indiana Wesleyan University? ❑ Yes ❑ No

Names of brothers and sisters and year of H.S. graduation:

1. _____ 2. _____

3. _____ 4. _____

EMERGENCY INFORMATION

Name of individual we should contact in case of emergency: _____

Address _____ City _____ State _____ Zip _____

_____

Home phone (_____) _____ Work phone (_____) _____ Cell phone (_____) _____

Send your application to:

Indiana Wesleyan University
Admissions
4201 South Washington Street
Marion, Indiana 46953-4974

http://www.indwes.edu/Academics/JWHC/Summer-Scholars/

SCHOOL INFORMATION

Intended major interest: (list your preferred major program) 1st _____ 2nd _____

Name of high school _____

Telephone (_____) _____

School address _____ City _____ State _____ Zip _____

ESSAY: A 400-word essay describing a challenge you have faced and overcome and what you learned from the experience.

COMMUNITY VALUES CONTRACT

Indiana Wesleyan University is a Christian comprehensive university with a foundation in the liberal arts. As such, it is a community joined together to further academic achievement, personal development and spiritual growth. Together, the community seeks to honor Christ by integrating faith, learning and living. With this purpose in mind, please respond to the following questions regarding joining this community:

1. **Are you committed to Christ as your personal Savior?** ❑ **Yes** ❑ **No**
   If not, will you show respect for a Christian perspective? ❑ **Yes** ❑ **No**

Certain behaviors are expressly prohibited by Scripture. These include dishonesty in all forms (lying, cheating, stealing), impurity in speech (gossip, slander, profanity, vulgarity), sexual impurity (premarital sex, adultery, homosexual behavior) and substance abuse (tobacco, alcoholic beverages, harmful drugs).

2. **Do you agree to avoid these behaviors while attending IWU?** ❑ **Yes** ❑ **No**

Corporate worship aids in community building and support of the body of Christ. We gather as a community for Bible studies and other University-related events as a special time for spiritual growth.

3. **Do you feel comfortable attending a university that has required Bible studies and has placed classroom prayer and other spiritual development opportunities as important priorities?** ❑ **Yes** ❑ **No**

Scripture teaches that all our actions (work, study, play) should be performed to the glory of God. We endeavor, therefore, to be selective in choices of entertainment and recreation, promoting those that strengthen the body of Christ.

4. **Will you avoid unwholesome entertainment and materials in your life while attending IWU (i.g. pornography, gambling, etc.)?** ❑ **Yes** ❑ **No**

SUMMER SCHOLARS APPLICANT

I certify that all the information collected in this application is correct and that the opinions expressed are mine. I understand that my signature permits officials at Indiana Wesleyan University to review my application file.

Student signature _____ Date _____

LETTER OF RECOMENDATION

Ask a teacher or guidance counselor in your high school to write a short statement recommending you to the Summer Scholars Program. The recommendation should evaluate your academic performance. Mail the recommendation to the address on the front page of this application.

HIGH SCHOOL TRANSCRIPT

High School Guidance Counselor: I have reviewed this student's academic file and believe he/she is qualified for the IWU Summer Scholars Program.

Cumulative GPA: _____ (please convert to 4.0 scale and send official transcript)

ACT/SAT score(s): _____ or PLAN/PSAT score(s): _____

School official signature _____ Title _____

Telephone (_____) _____ E-mail _____

COURSE PREFERENCE:

My first course choice : ❑ World Civilizations ❑ Principles of Sociology