

NORTHWEST COLLEGE

APPLICATION FOR ADMISSION

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE FILLING OUT FORM.

Applicant must be of approved Christian character fulfilling spiritual and academic requirements as stated in the school catalog. All questions must be answered in full with **INK** before the application will be considered by the Admissions Committee.
Be certain to enclose the \$20 application fee.

1. Check Application as: Beginning Freshman
 Transfer Student
2. Planned Attendance: Full-Time Part-Time
 Desire Admission To: (check one term) 19 ____
 Fall Spring Summer
3. On-Campus Single Resident Commuter
 On-Campus Married Resident

OFFICE USE ONLY:

ID# _____
 App. # _____
 Fee rcvd. _____
 Ack. sent _____
 Appr. sent _____
 T app. sent _____
 Final app. _____

(PLEASE PRINT)

I. GENERAL INFORMATION

1. Title: Mr. Mrs. Miss Rev. Dr. (circle one) 2. Sex: M F

3. Name: _____

LAST
FIRST
MIDDLE
MAIDEN NAME (IF APPLICABLE)

4. Current Address: _____

STREET AND NUMBER
CITY
STATE
ZIP

5. Permanent Address: _____

STREET AND NUMBER
CITY
STATE
ZIP

6. Age: _____ Birth Date: _____ Birth Place: _____

MONTH DAY YEAR
CITY STATE

7. Telephone #: (_____) _____ Social Security #: _____

FAMILY INFORMATION:

8. Parents' Title: Mr. & Mrs. Rev. & Mrs. Dr. & Mrs. Dr. & Dr. Mr. Mrs. Ms. Rev. Dr. (circle one)

9. Father's Name: _____

LAST
FIRST
MIDDLE

STREET AND NUMBER
CITY
STATE
ZIP

10. Mother's Name: _____

LAST
FIRST
MIDDLE

STREET & NUMBER (if Different)
CITY
STATE
ZIP

11. Parents' Telephone #: (_____) _____

12. Parents' Occupation: Father: _____ Mother: _____

13. Have Parents or Other Members of your family attended N.C.? Y N Please list _____

14. Number of older children: _____ younger: _____

STATISTICAL INFORMATION:

15. Citizenship: U.S. Other _____

16. Denomination: A/G Other _____

17. Church name and address: _____ Senior Pastor: _____

18. Marital Status: Single Married Widowed Divorced Divorced, remarried Engaged

Name and ages of children if any: _____

Name of Spouse _____

19. Race: American Indian/Eskimo Asian/Oriental Black
 Caucasian Hispanic Other _____

20. Are you a veteran? Yes No
Are you a dependent of a deceased or disabled veteran? Yes No

II. EDUCATIONAL INFORMATION:

1. Last high school attended: _____
NAME OF SCHOOL

STREET AND NUMBER _____

CITY _____ STATE _____ ZIP _____

2. Did you graduate? Yes No Date: _____ If not, _____ years attended.
MONTH YEAR

3. If still attending, give expected date of graduation: _____

4. If you did not graduate, did you get a GED? Yes No (If yes, attach copy.)

5. Approximate high school Grade Point Average: _____

6. Which college entrance exam have you taken? ACT SAT

7. List below all colleges (or other post-high school institutions) attended.
NAME CITY DATES ATTENDED MAJOR DEGREE (if any)

(please be sure to give dates attended.)

8. Check here if you have requested high school and college (if attended) transcripts.

III. COLLEGE PLANS AND INTERESTS:

1. How did you first hear about Northwest? _____

2. Please indicate one college program of interest:
 B.A. (4 years) A.A. (2 years) Other/undecided

3. If B.A., please indicate one major of interest:

- Biblical Literature
- Christian Education
- Church Music
- Missions
- Pastoral Ministries
- Religion and Philosophy
- Youth Ministries
- Behavioral Science
- Business Management and Administration
- Elementary Education
- Interdisciplinary Studies
- Undecided

4. If A.A., please indicate one option of interest: I - General Studies II - Office Technology
 III - Transfer Degree - Undecided

IV. FINANCES:

1. Do you now have adequate financial resources to attend Northwest College? Yes No

2. Will you need financial aid? Yes No
Have you completed a federal Financial Aid Form? Yes No

APPLICATION INSTRUCTIONS

1. Complete application in ink. Please print clearly.
2. Include the application fee.
3. Complete clip form requesting your high school transcript. Mail to the high school where you graduated, or the high school you intend to graduate from. Transcripts are required on all applications. When requesting your transcript, please note that an updated copy should be sent upon graduation.
4. Hand deliver or mail the enclosed REFERENCE FORMS as follows:
 - A. To your pastor. (In churches with youth pastor, your pastor may designate the youth pastor to complete the reference.)
 - B. Give the second reference form to a church leader, elder, board member, or lay leader in your church.
 - C. Be sure to fill out your full name on the reference forms the same way it appears on your application.
 - D. Sign the waiver of access on each reference form if you so choose.

It would be appropriate for you to include, with the forms, a stamped envelope addressed to the College.
5. IF YOU ARE A COLLEGE STUDENT...(past/present)...you will need to send a written request to each college attended, requesting an official transcript of your record. It must be mailed to: Office of Enrollment Services, Northwest College, P.O. Box 579, Kirkland, WA 98083-0579. This is needed for two reasons: (1) to show dismissal status and (2) to consider possible transfer credit.

WHEN ALL THE ABOVE MATERIALS ARE RECEIVED, your application can be submitted for approval action.

- BEFORE MAILING PLEASE CHECK:
- Form completed in full, signed and dated.
 - Application fee included.
 - Biographical Background and Christian Experience form completed.
 - Transcripts requested.

-----[Feel free to make additional copies of this form as needed.]-----

TRANSCRIPT REQUEST

For the purpose of seeking admission to NORTHWEST COLLEGE, please send an official copy of my transcript to:

Office of Enrollment Services
NORTHWEST COLLEGE
P.O. Box 579
Kirkland, WA 98083-0579

Print Name _____
LAST FIRST MIDDLE MAIDEN NAME (If applicable)

Year of graduation/last attendance was: _____
MONTH DAY YEAR

DATE _____ SIGNATURE _____
MONTH DAY YEAR

CHURCH LEADER REFERENCE

OFFICE OF ENROLLMENT SERVICES
NORTHWEST COLLEGE

P. O. Box 579, Kirkland, Washington 98083-0579

Name of Applicant _____ City _____ State _____

NOTE: In consideration of the purposes and objectives of confidentiality of the character-reference process, I hereby agree to waive future access to this document.

Signature of applicant _____ Date _____
Month Day Year

This reference form will not be available to the applicant for inspection if he/she has signed above.
The person named above has applied for admission to Northwest College as a student. Practically the only way we have of ascertaining the character of applicants is to get a frank and unbiased statement from their references. We will greatly appreciate your estimate of this person as a potential student at this College. Please complete and return this form.

1. How long have you known applicant? _____ In what capacity? _____
2. Has (s)he been a born-again Christian during this time? _____ If not, how long has (s)he been converted? _____
3. To your knowledge, has applicant lived a consistent Christian life? _____ If not, please explain.

To the following items please place a check mark in the appropriate space on the scale. If you have insufficient information or no opinion on a particular topic, please omit it.

4. Christian character _____
unstable generally stable sound, well-balanced outstanding
5. Seriousness of purpose _____
purposeless vacillating potential self-directed, purposeful
6. Industry _____
seldom works even under pressure needs constant pressure needs occasional prodding does work assigned does extra work
7. Cooperation _____
uncooperative usually cooperative cooperative with some initiative very cooperative
8. Concern for others _____
anti-social indifferent self-centered somewhat socially concerned deeply concerned
9. Personality _____
avoided unnoticed accepted well-liked sought out
10. Responsibility _____
unreliable somewhat dependable usually dependable conscientious assumes much responsibility
11. Emotional stability _____
excitable unresponsive usually well balanced well balanced exceptionally well balanced
12. To your knowledge has this applicant experienced any emotional or mental health problems?
[] Yes [] No [] Uncertain
13. Financial integrity _____
squanders money; fails to pay bills barely meets obligations satisfactory conserves money good manager
14. Health _____
frequently ill occasionally ill generally good health exceptionally good health
15. Northwest College holds to certain standards of conduct bearing on use of tobacco, use of alcohol or drugs, social dancing, dishonesty in business and sexual immorality. Please comment on the reverse side only if you feel applicant would have a problem adjusting to the College with regard to any of these areas.
16. How do you evaluate the applicant's promise of success in life?
limited promises fair success average above average will excel

17. Recommendation _____
not recommended* yes, with some reservations* yes, without hesitation

*If you have not recommended or have reservations about recommending this applicant, please explain. On the back of this sheet, write any comments that you feel would help us in regard to this applicant.

Signature _____ Name (print) _____

Address _____ City _____ State _____ Zip _____

Phone (_____) _____ Date _____

FINANCES, Continued...

3. Check if you are eligible for any of the following:

V.A. Benefits

Social Security Educational Benefits

Vocational Rehabilitation

Scholarship(s) _____

Other special benefits _____

4. Check if you wish information on any of the following:

Federal or State Aid:

Federal or State Grants

Federal Student Loans

Alaska Student Loans

Employment:

On-Campus

Off-Campus

College Scholarships/Tuition Credits:

Freshman Academic Scholarship

Tuition credits for ministers, missionaries,
their dependents, student spouses

Talent & Ministry Potential
(by Audition/Interview)

Give work experience: _____

V. HEALTH:

1. In view of national concerns over the continuing problem of communicable diseases and their control, it is important for the College to have the following information. At issue is the health and well-being of the College community, and your medical care and general progress as a student. Your open and honest response will be appreciated.

A. How would you describe the general state of your health?

EXCELLENT

GOOD

FAIR

POOR

B. Have you been hospitalized in the past two years?

YES

NO

If yes, explain.

C. Have you required doctor's care in the past year?

YES

NO

If yes, explain.

D. Are you currently being treated, or have you been treated in the last five years, for a communicable disease?

YES

NO

If yes, explain.

E. Are you currently taking any regular prescription medications? If yes, list. _____

YES

NO

F. Approximately how many days of school or work have you missed in the last year due to illness or health problems? _____

2. If you have experienced emotional or mental health problems at any time, check here.

Have you ever been under the care of a doctor (psychiatrist) or other mental health professional (psychologist) for emotional or mental health problems? YES NO

Please add a statement of particulars, including the nature of the illness and treatment received if any. **This should be attached as a separate sheet to the application.**

NOTE: A more complete medical report form, provided by the College, must be completed and submitted in following approval to attend. This form must be received in Enrollment Services prior to registration.

VI. BIOGRAPHICAL BACKGROUND, CHRISTIAN EXPERIENCE AND REFERENCES:

1. Please complete your biographical background and Christian experience on the back page of this form.

Check here when completed.

2. Have you ever used alcoholic beverages, tobacco or narcotics? YES NO

If yes, which: _____ Date of discontinuance: _____

MONTH DAY YEAR

3. Check here if you have ever incurred an arrest record (excluding minor traffic violations) or have been a member of an organization advocating or practicing violence. Attach statement giving details. (This does not necessarily exclude you from admission to the College.)

4. PLEASE HAND DELIVER REFERENCE FORMS TO YOUR PASTOR AND CHURCH LEADER (not a relative), and list the names and addresses below in the event that it should be necessary to contact them.

Pastor _____

Phone (_____) _____ Address _____

Church Leader _____

Phone (_____) _____ Address _____

SIGNATURE. In applying for admission to Northwest College, I affirm that I will abide by its purposes and standards of conduct as stated in the College catalog and Student Handbook. I hereby certify that the above statements are true and accurate.

Signature _____ Date _____

MONTH DAY YEAR

PLEASE REMOVE FLAP

Return Completed Application To:

OFFICE OF ENROLLMENT SERVICES

NORTHWEST COLLEGE

P.O. Box 579, Kirkland, WA 98083-0579

Any Questions? Please Call:

(206) 822-8266

Toll-Free 1-(800) NC6-3646

