

Freshman Application for Admission

Please submit by August 5 for Fall enrollment and January 5 for Spring enrollment.

Personal Information	, ,		, ,
Last Name (Legal)		First Name (Legal)	Middle Name (Legal)
Preferred Name		Email Address	Home Phone Number
Address (Permanent Maili	ng Address)		Cell Phone Number
City	State	Zip Code	Birthday (Month/Day/Year
Home Church			Social Security Number
Gender:	☐ Male	Marital Status: Single	
Are you a Veteran?	☐ Yes ☐ No	Are you eligible for VA E	Educational Benefits?
Are you a U.S. Citizen?	☐ Yes ☐ No	f No, what Visa do you hold?	
Are you an Immersed B			
Parent/Guardian Last N	lame	First Name	Home Phone Number
Address (If different from	yours)		Cell Phone Number
City	State	Zip Code	Email Address
_	•		d not married must live either on campus or with . If living off campus with a relative, please provide
Relative's Name			Relationship
Address (Street/City/State	/Zip)		Home Phone Number
	Please Provide the Fo	llowing Information for the Depar	tment of Education:
Are you Hispanic/Latin If you answer "No" to Races/Ethnicities that	Question #1, select one	or more of the following	
☐ American Indian o☐ Native Hawaiian o	r Alaska Native 🔲 / r other Pacific Islander	Asian 🔲 Black or African A 🔲 White	merican
For Office Use:		Application Fee:	Date Received:

Enrollment Information				
I plan to enroll 🚨 August, 20 for the Fall semester or 🖵 January, 20_	for the Spring Semester.			
Student Status: First Time Student (At college level)	Enrollment Status: Degree Seeking Non-Degree Seeking			
Which degree are you seeking? ☐ Bachelors ☐ Associates Inte	ended Major			
Do you seek Co-Admission between OCC and MSSU?				
Educational Information				
Name of High School	Phone Number			
City/State				
Date of Graduation or GED (Month/Year) Have you taken the ACT/SAT?	o you plan to take it?			
Other Information	you plan to take it.			
Have you ever been suspended from any educational institution?	□ No			
If yes, which institution and when? Nature of suspension Are you currently on suspension? Have you ever been convicted of a felony? Have you used tobacco within the past 2 years? Have you used alcohol within the past 2 years? Yes No Have you ever used illegal drugs? Have you ever abused prescription drugs? A written explanation for each question marked "Yeonsideration for Acceptance will be consideration."	•			
Signature				
I certify that the information contained within this application is true and coapplication does not guarantee acceptance.	orrect. I understand that completing this			
Signature	Date			
Please return to: Admissions Office Ozark Christian College 1111 North Main Street, Joplin, Misson 417.626.1234 ext. 2022/admissions@OCC.ed				

All qualified applicants will be considered without regard to race, disability, national origin or ethnic background.