## APPLICATION FOR UNDERGRADUATE ADMISSION HAMPTON UNIVERSITY – P. O. BOX 6162 - HAMPTON, VIRGINIA 23668 ACCELERATED EVENING PROGRAMS

**Please type or print in black ink.** Please provide all information requested. This application must be returned with a non-refundable application fee of \$35.00. **NO PERSONAL CHECKS WILL BE ACCEPTED** 

	PERSONAL DA'	TA	
LEGAL NAME_			
LAST	FIRST	MIDDLE (COMPLETE)	JR, ETC
SOCIAL SECURITY NUMBER			
SOCIAL SECURITY NUMBER GENDER	DATE OF BIRTH: (MM.	/DD/YY)	
LOCAL ADDRESS (NUMBER AND STR	REET):		
OLTV OD TOWAL	CTATE	COUNTDY	710 0005
CITY OR TOWN	STATE	COUNTRY	ZIP CODE
PERMANENT HOME ADDRESS (for Bil	iling, Financial Aid, and Residenc	cy purposes):	
	NUMBER AND STR	EET	
CITY OR TOWN	STATE	COUNTRY	ZIP CODE
LOCAL TELEPHONE ( )	WORK T	relephone (            )	
CELL PHONE NUMBER ( )		, , , , –	
EMAIL ADDRESS			
EMERGENCY CONTACT (NAME)			
RELATIONSHIP	PHONE NUMBER	! ( )	
ADDRESS/CITY/STATE/ZIP			
HAVE YOU EVER BEEN CONVICTED			
ARE YOU A U.S. CITIZEN YES	DATE IT EXF	PIRES	
U.S PERMANENT RESIDENT NUMBER COUNTRY OF CITIZENSHIP	₹:		
MARITAL STATUS (Circle Below)	RELIGION (Circle Below) BP-BAPTIST	<b>ETHNICITY</b> (Circle Bell 2 - BLACK, NON-HISPA	
S -SINGLE	RC-CATHOLIC	3 – AMERICAN INDIAN	/ALASKAN NATIVE
M-MARRIED	EP-EPISCOPAL	4 – ASIAN OR PACIFIC	ISLANDER
D-DIVORCED W-WIDOWED	IS-ISLAM JE-JEWISH	5 – HISPANIC 6 – WHITE, NON-HISPA	ANIC
P-SEPARATED	LU-LUTHERAN	0 - WHITE, NON-HISP	AINIC
T-OTHER	PT-PROTESTANT		
1	NO-NONE		
	<b>0</b> -OTHER		

WHO (NAME) \_\_\_\_\_

WHEN?  VETERAN STATUS: ☐ ELIGIBLE FOR BENEFITS ☐ DEPENDENT ☐ VET/NO BENEFITS ☐ ELIGIBLE FOR BENEFITS BEFORE 1977 ☐ VOCATIONAL REHABILITAION ☐ ACTIVE DUTY NOT ELIGIBLE FOR BENEFITS ☐ N/A						
STUDENT TYPE: Undergraduate Major Undergraduate Special (Non-degree) Full-time Part-Time						
DEGE	REE PROGRAMS - CLASSROOM					
BACHELOR OF ARTS DEGREE: General Studies Concentration Areas Early/Primary Education Paralegal Studies  ASSOCIATE OF SCIENCE DEGREE: Aviation Maintenance Technology	BACHELOR OF SCIENCE DEGREE:  Business Management Concentration Areas Hotel/Restaurant Mgt Aviation Maintenance Tech Systems Organization & Management Concentration Area Human Resource Management Public Safety Administration Fire Administration Concentration Emergency and Disaster Management Concentration Criminal Justice Concentration Emergency Medical Systems Concentration	CERTIFICATE PROGRAMS:  Corrections General Studies Hotel/Restaurant Management Human Resource Management Paralegal Studies				
If not pursuing a degree, check which: Audit Only Credit for Transfer to Personal enrichment not linked to degree or certification						
SESSION APPLYING FOR:  FALL I	☐ FALL II ☐ SPRING III ☐ SF	PRING IV SUMMER V				
EDUCATIONAL DATA						
HIGH SCHOOLNAME CITY/STATE						
GRADUATION DATE DIPLOMA RECEIVED YES NO GED RECEIVED YES NO IF SO, DATE FROM WHERE (CITY/STATE)?						

COLLEGE/UNIVERSITIES	ATTENDED- LIST ALL ACADE	INIC WO	RK BEYOND HIGH SCHOOL. MOST RECENT FIRST.	
NAME OF COLLEGE/UNIV	ERSITY	CITY	STATE	
MAJOR	DEGREE/CERTIFICATION		DATES ATTENDED (MM/DD/YY) FROM TO	
NAME OF COLLEGE/UNIV	ERSITY	CITY	STATE	
MAJOR	DEGREE/CERTIFICATION		DATES ATTENDED (MM/DD/YY) FROM TO	
HAVE YOU EVER BEEN PI	REVIOUSLY ENROLLED AT H	IAMPTON	NUNIVERSITY? YESNO	
DATES ENROLLED	FROM	-	TO	
IF YES, INDICATE REASON	N FOR LEAVING:			
UNDER WHAT NAME WER	RE YOU PREVIOUSLY ENROL	LED?		
	DISMISSAL)		SITY OR ANY COLLEGE/UNIVERSITY? YES NO	
☐ YES ☐ NO IF YES, N			ANOTHER COLLEGE/UNIVERSITY?	
ON A SEPARATE SHEE			EXPLAINING WHY YOU WANT TO ATTEND COLLEGE.	
	TYPE ESSAY OR W	RITE IN	INK. (250-300 Words)	
	C	HECKL	JST	
APPLICATIONS WILL NOT	BE PROCESSED WITHOUT	THE FOL	LOWING:	
☐ HIGH SCHOOL TRANSCRIPT ☐ ENCLOSED ☐ BEING FOWARDED ☐ OFFICIAL COLLEGE TRANSCRIPTS ☐ ENCLOSED ☐ BEING FOWARDED				
TRANSCRIPTS MAY BE IN	ANOTHER NAME			
			PRINT NAME	
\$35.00 NON-REFUNDA	BLE APPLICATION FEE IS EN	NCLOSE	) (PERSONAL CHECKS ARE NOT ACCEPTED)	
	OUT US? Student Referral Specify)		Newspaper	
	ALL APPLICAN	JTS MI	ST SIGN BELOW	
	SIFICATION OF ANY INFORM DMISSION TO HAMPTON UN	MATION F	PROVIDED HERE FOR ADMISSION WILL RESULT IN A Y, ACCELERATED EVENING PROGRAMS, AND THAT A	
SIGNATURE			DATE	

OFFICE USE ONLY	
Application Fee Received	Medical Records Forward ☐ Yes ☐ No ☐ Essay
☐ High School Transcript Received	Official College Transcripts Received
☐ Two Letters of Reference (Religious S	tudies only)
HUID#: PERSONA	L PIN: : ADVISEMENT PIN:

Hampton University adheres to the principle of equal education and employment without regard to race, gender, color, creed, national origin or disability. This policy extends to all programs and activities supported by the University.