

Join in. Stand out.

Honors Program Application Form

General Information:

| Name of Applicant: |
|--|
| Social Security Number of Applicant: |
| Date of Birth: |
| Gender: Male Female |
| Have you applied for admission to Delta State University? Yes No |
| First Generation College student? Yes No |
| Mailing Address (include City, State, and Zip Code; Country): |
| |
| |
| Home Phone Number (including area code): |
| Cell Phone Number (including area code): |
| Student's E-mail Address: |
| Alternate E-mail Address: |
| Date (Term and Year) of Application to DSU: |

Academic Information:

| Composite ACT Score: | |
|---|--------------------------|
| Name of High School: | |
| High School Address: | |
| | |
| High School GPA (based on 4.0 scale): | University GPA (if any): |
| High School Rank out of (if know | wn) |
| Prospective Major (if known): | |
| Interests (i.e. athletics, extracurricular activities): | |
| | |
| Student Signature | Date |

Please return this form and other application materials to:

Dr. Leslie Fadiga-Stewart Director, Delta State University Honors Program DSU Box 3234 Kethley Hall Suite A Cleveland, MS 38733

COMPLETED APPLICATIONS ARE DUE BY FEBRUARY 15.

Delivery confirmation is recommended. Faxed or emailed applications will not be accepted. The applicant will receive an email upon receipt of all items received on the student checklist. Award letters will be sent to the mailing address listed above and only to students who have been accepted for admission to Delta State University.

Last updated November 2010