

BELHAVEN
UNIVERSITY

Omega College
Application for Admission

Please complete and return to the Admission Office,
1500 Peachtree Street, Box 153, Jackson, MS 39202.

Name _____ Preferred Name _____ Date of Birth _____

Address _____ City _____ ST _____ ZIP _____

Phone # _____ E-mail _____

ACT/SAT score _____ GPA _____ Class Rank _____

Proposed Major _____ Minor _____

Please answer the following questions as best you can. Your answers will help start our discussion of what your course of study might look like. You may use a separate sheet of paper for your answers.

What are your areas of giftedness? How do you use your gifts now and how do you see yourself using them in the future?

What do you see yourself doing both professionally and personally 10 years from now?

What do you want to achieve in your professional life?

What subjects do you expect to take at Belhaven to prepare you for your profession?

What other subject/courses are you interested in "just for the fun of it?"

Signature

Date