

THE APPLICATION PROCESS

The required application documents are listed below. Applicants will not be considered for admission until all documents are received. However, all documents do not need to be submitted at once.

Applicants will be notified periodically of what items are missing in their application file. Priority will be given to students whose applications are received and completed by the early deadline of **April 15, 2012**. Other applicants will be considered on a space available basis. Applications completed before April 15, will receive \$100 credit toward the cost of the program.

If you have any additional questions about the application process, please contact the Office of Admissions at 800-352-1050 or by emailing icap@millsaps.edu.

CHECKLIST FOR ADMISSIONS

- Completed Application
- Official High School Transcripts—If enrolled in a PSEO program, please include official copies of these transcripts as well.
- Letter of Recommendation from Guidance Counselor

EMAIL TO:

icap@millsaps.edu

If you have any questions, call Office of Admissions at 800-352-1050 or visit icap.millsaps.edu

MAIL TO:

Millsaps College
Office of Admissions
1701 North State Street
Jackson, MS 39210-0001

NAME

Last _____
 First _____ Middle _____
 Preferred _____

HOME ADDRESS

Street _____
 City _____ ST _____ Zip _____

MAIL ADDRESS (if different from above)

Street _____
 City _____ ST _____ Zip _____

PERSONAL

Date of Birth _____ Male Female

U.S. Citizen International Student Nationality

Visa Type _____

Do you have a U.S. Passport? Yes No

Have you ever been found responsible for a disciplinary violation at any high school you have attended, that resulted in your probation, suspension, removal, dismissal, or expulsion from the school? Yes No

Have you every been convicted of a misdemeanor, felony, or other crime?
 Yes No

The College complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, creed, color, disability, marital status, national origin, pregnancy, race, religion, sex or sexual orientation.

CONFIDENTIALITY: We value your comments and ask that you complete this form with the knowledge that it may be retained in your file should you matriculate at Millsaps. In accordance with the Family Education Rights and Privacy Act of 1974, students have access to their permanent files, which may include forms such as this one. Millsaps does not provide access to admissions records to those students who are denied admission, or those students who decline an offer of admission. We appreciate your cooperation. Millsaps administers all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, disability, or sex. The admissions process at private undergraduate institutions is exempt from the federal regulation implementation Title IX of the Education Amendments of 1972.

ACADEMIC

High School _____

High School Location _____

High School CEEB Code _____

Dates Attended _____

Class Standing _____ G.P.A. _____

Please list relevant awards, activities, and honors; note any leadership roles.

PARENTS

MOTHER Last _____ First _____

FATHER Last _____ First _____

Preferred Contact Mother Father

MAIL ADDRESS (if different from above)

Street _____

City _____ ST _____ Zip _____

I certify that the information on this application is accurate.

Signature _____

Date _____