HIGHLAND COMMUNITY COLLEGE

Student ID Number (if known)_____

Name_____

Address_____

City_____ State_____ Zip Code_____

Phone Number _____ E-mail Address_____

Major (if known)_____

Qualifications

    Freshmen (less than 12 hours of college credit)

        High School class standing_____ in class of _____

        High School Graduation Date_____

        High School_____

        Composite ACT_____ <u>OR</u> SAT score _____ out of 1600

    Students currently enrolled at HCC (more than 12 hours of college credit)

        _____GPA after _____ hours

    Transfer Students (more than 12 hours of college credit)

        Transfer school_____

        _____GPA after _____ credit hours

Student Statement

    Please attach a ONE-PAGE, double-spaced, typed response to the following statement:
    Explain your academic and career goals and reasons for applying to the Honors Program.

Certification

    The above statements are correct and complete. I agree that the above statements
    concerning high school class standing, GPA, and ACT scores may be certified by the
    appropriate high school or college officials.

Signature_____ Date_____

Return completed application to Juliet Moderow, Natural Science-109

For Office Use Only   Date Received_____

Approved_____   Not Approved_____

Comments:

Director's Signature_____ _____ Date_____