



Application  
for Admission  
and Scholarships

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**2009 – 2010**

**COMPLETING YOUR APPLICATION FOR ADMISSION:**

- Application:** *Complete this application, and sign student agreement at the end of the application*
- Application Fee:** *Include \$25 non-refundable application fee, payable to Southern Catholic College*
- High School Transcript:** *Have your guidance counselor send to the Office of Admissions your most recent high school transcript*
- Test Scores:** *Request an official copy of your ACT (school code 6405) and/or SAT (school code 5038) scores if not reflected on your transcript*
- Academic Letter of Recommendation:** *Ask an academic teacher or guidance counselor to send or email a letter of recommendation to the Office of Admissions*
- College Transcripts:** *If applicable, submit an official transcript of any college or university courses completed*

**Mail to:**

Southern Catholic College  
Office of Admissions  
330 Southern Catholic Drive  
Dawsonville, GA 30534.

**Email to:**

[admissions@southerncatholic.org](mailto:admissions@southerncatholic.org)



## APPLICATION FOR ADMISSION

### APPLICATION INFORMATION

**Applying for:**       Fall Term (August) 2009     Spring Term (January) 2010

**Housing Plans:**     Will live in residence hall     Will live with parent(s) or legal guardian(s)  
 Will live off campus (Applies to those 23 and older, married, or military)

**Applying as:**       First-time Freshman                       Freshman Transfer  
 Transfer Student (earned and/or enrolled in at least 24 transferable credit hours)

**Classification:**     Full-Time Student                       Part-Time Student

**Intended Major:**     Business                                       Sacred Theology  
 English                                         Integrated Sciences  
 History                                         Psychology  
 Philosophy                                     Unknown

I plan to apply for need-based financial aid:     Yes     No

### PERSONAL DATA

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Gender:                       male  female

Preferred Name: \_\_\_\_\_

### PERMANENT HOME ADDRESS

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**MAILING ADDRESS**

Check here if same as Permanent Home Address

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Use this address until: \_\_\_\_\_ (mm/dd/yyyy)

**OTHER PERSONAL DATA**

Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)

Location of Birth (City, State, Country): \_\_\_\_\_

- Citizenship:  United States  
 US / Dual Citizenship  
 US Permanent Resident\*  
 Other\*\*

Social Security Number: \_\_\_\_\_

\*Permanent Resident Number: A-\_\_\_\_\_

\*\*Country of citizenship if other than the US: \_\_\_\_\_

**INTEREST IN SOUTHERN CATHOLIC COLLEGE**

How did you hear about Southern Catholic College? \_\_\_\_\_

Please list any family members or friends who are currently attending or who previously attended SCC:

Name	Relationship	Years Attended

Have you visited Southern Catholic College?  Yes  No

If so, date of visit: \_\_\_\_\_ (mm/dd/yyyy)

To what other colleges are you applying?

Name	City, State

**ETHNIC & RELIGIOUS AFFILIATION (Optional)**

What is your religious affiliation? \_\_\_\_\_

Parish/Church which you attend: \_\_\_\_\_ City, State: \_\_\_\_\_

- What is your ethnic heritage?  American Indian  
 Asian/Pacific Islander  
 Black/African American  
 Caucasian/White  
 Hispanic  
 Multiracial

**FAMILY DATA**

With whom do you reside? \_\_\_\_\_

**Mother/Guardian**

Full Name: \_\_\_\_\_

Check here if same as applicant's Permanent Home Address / Home Phone

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

College(s) Attended / Degree(s) Earned: \_\_\_\_\_

**Father/Guardian**

Full Name: \_\_\_\_\_

Check here if same as applicant's Permanent Home Address / Home Phone

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

College(s) Attended / Degree(s) Earned: \_\_\_\_\_

**High School Age Siblings** *(Attach an additional sheet if necessary)*

Full Name	Gender	High School	Grad Year
	<input type="checkbox"/> M <input type="checkbox"/> F		
	<input type="checkbox"/> M <input type="checkbox"/> F		
	<input type="checkbox"/> M <input type="checkbox"/> F		

**Younger Siblings** *(Attach an additional sheet if necessary)*

Full Name	Gender	Age
	<input type="checkbox"/> M <input type="checkbox"/> F	
	<input type="checkbox"/> M <input type="checkbox"/> F	
	<input type="checkbox"/> M <input type="checkbox"/> F	

**Adult Siblings** *(Attach an additional sheet if necessary)*

Full Name	Gender	College	Grad Year
	<input type="checkbox"/> M <input type="checkbox"/> F		
	<input type="checkbox"/> M <input type="checkbox"/> F		
	<input type="checkbox"/> M <input type="checkbox"/> F		

**ACADEMIC HISTORY**

**High School Information**

High School: \_\_\_\_\_

Graduation Date: \_\_\_\_\_ Type of Institution:  Public  Private  Home School

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Phone: \_\_\_\_\_

College Counselor: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

**Testing Information**

Have you taken the SAT?  Yes  No

Score: Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Mult Choice \_\_\_\_\_ Essay \_\_\_\_\_

Have you taken the ACT?  Yes  No

Score: English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Composite \_\_\_\_\_

Do you plan to retake the ACT or SAT?  Yes  No If so, date to retake: \_\_\_\_\_

Have you taken Advanced Placement (AP) courses?  Yes  No If so, list courses below.

AP Course Title	Completed?	Test Score
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**College Information** *(if applicable)*

List below all colleges attended for credit.

College	Location (City, State)	Date Attended		Credits/Degrees Earned
		From	To	

**EXTRACURRICULAR ACTIVITIES / ACADEMIC HONORS**

In order of their importance to you, list organizations and activities in which you have participated during high school. You may include, for example, academic organizations or activities, sports, extracurricular activities, summer study, travel, and church and civic activities. Attach an additional sheet if necessary.

Activity	Grade Level(s) of Participation	Offices Held / Honors Earned	Brief Description
	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		
	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		
	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		
	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		
	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		

**WORK/VOLUNTEER EXPERIENCE**

Employer/Organization	Dates	Hours per Week	Brief Description

Have you ever been suspended, expelled or required to withdraw for academic and/or disciplinary reasons from any high school or college?  Yes  No

*If Yes on a separate sheet of paper explain fully the nature of the suspension/expulsion/withdrawal and the date(s) and school(s) it/they occurred.*

Have you ever been convicted of, pled guilty to or pled no contest to a felony or misdemeanor charge, or are any criminal charges now pending against you?  Yes  No

*If Yes, on a separate sheet of paper explain fully the nature of the offense(s), the date(s) it/they occurred, the name and location of the court(s) and sentence(s) imposed. Please submit court documentation if appropriate.*

**STUDENT AGREEMENT**

In signing this application, I certify that the information supplied is true and complete. Any falsifications or omissions may be grounds for denial of admission or for disenrollment. If I am accepted for admission and enroll as a student at Southern Catholic College, I agree to abide by the rules and regulations of the College. By completing this application I understand that I will be considered for all academic and/or designated scholarships for which I may qualify.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

*(If you are under age 18)*