TRADITIONAL UNDERGRADUATE

APPLICATION FOR ADMISSION

College of Business, Arts, Sciences & Education



FAITH | FRIENDS | FUTURE

Easy Steps to Admission

- Return this completed application to the Office of Admissions at Friends University.
 Have your transcripts and test scores sent to Friends University.

Personal Information

First name	First-time freshmen□ Ira	nster□ Reactivate□ choc	ose one				
Permanent home address City	First name	Middle name_		_Last name			
Mailing address (if different than permanent address) City	Preferred first name		Other or previous last name				
Mailing address (if different than permanent address) City	Permanent home address_						
Email address* Home phone* Cellphone* Social security number Social security number Birthdate Social security number Social security Social s	City		State	ZIP			
Email address*	Mailing address (if differen	it than permanent address)_					
Cellphone*	City		State	ZIP			
Priends will use this email and phone number for important admission communications. May we text you? □ Yes □ No Social security number □ Birthdate □ □ Male □ Female J.S. Citizen? □ Yes □ No Are you an immigrant permanent resident? □ Yes □ No If no, country of citizenship/birth □ City of birth □ Have you already qualified for the DREAM Act? □ Yes □ No Do you currently have a U.S. Visa? □ Yes □ No Visa Type: □ U.S. Military or Veteran? □ Yes □ No Have you been convicted of a felony? □ Yes □ No If yes, please explain □ It is unlikely that a conviction will affect your admission to Friends University.) Name of church if you belong to one □ Relationship Type □ Address □ City □ State □ ZIP □ Email address □ Cellphone □ Last name □ Last name □ Relationship Type □ Address (if different than your permanent address) □ City □ State □ ZIP □ Parent or guardian information: First name □ Last name □ Cellphone	Email address*						
May we text you?	Home phone*		Cellphone*				
Social security number Birthdate Birthdate Birthdate S.S. Citizen? Pes No Are you an immigrant permanent resident? Pes No f no, country of citizenship/birth City of birth City of birth S. City of birth S. City of birth S. State	*Friends will use this email	and phone number for imp	ortant admission comr	nunications.			
D.S. Citizen? □ Yes □ No Are you an immigrant permanent resident? □ Yes □ No If no, country of citizenship/birth	May we text you? □ Yes □	¹ No					
fino, country of citizenship/birth	Social security number		Birthdate				
Have you already qualified for the DREAM Act? □Yes □No Do you currently have a U.S. Visa? □Yes □No Visa Type:	U.S. Citizen?□Yes□No	Are you an immigrant perm	anent resident? □ Yes	□No			
Do you currently have a U.S. Visa? □Yes □No Visa Type: U.S. Military or Veteran? □Yes □No Have you been convicted of a felony? □Yes □No If yes, please explain □ It is unlikely that a conviction will affect your admission to Friends University.) Name of church if you belong to one □ Emergency contact: Name □ Phone number □ Relationship Type □ Address □ City □ State □ ZIP □ Email address □ Last name □ Last name □ Relationship Type □ Address (if different than your permanent address) □ City □ State □ ZIP □ Parent or guardian information: First name □ Last name □ Relationship Type □ Address (if different than your permanent address) □ City □ State □ ZIP □ Parent email address □ Cellphone □ Cellphone □ Please list the name and high school graduation year of younger siblings: Sibling name □ D.O.B. □ HS graduation year □ D.O.B.	If no, country of citizenship	o/birth	City of birth_				
Have you been convicted of a felony? □Yes □No If yes, please explain	Have you already qualified	for the DREAM Act? □ Yes	□No				
Have you been convicted of a felony? □Yes □No If yes, please explain	Do you currently have a U.	S. Visa? □Yes □No Visa T	- ype:	U.S. Military or Veteran? ☐ Yes ☐ No			
Name of church if you belong to one	Have you been convicted	of a felony? □Yes □No If	yes, please explain				
Name of church if you belong to one	//+ is unlikely that a conviction wil	U affect your admission to Evianda	L Iniversity (
Emergency contact: Name Phone number Relationship Type Address City State ZIP Email address Home phone Cellphone Parent or guardian information: First name Last name Relationship Type Address (if different than your permanent address) City State ZIP Parent email address Home phone Cellphone Please list the name and high school graduation year of younger siblings: Sibling name D.O.B. HS graduation year Sibling name D.O.B. HS graduation year Sibling name D.O.B. HS graduation year Fibling name D.O.B. HS graduation year Relationship Type Are either of your parents pastors or full-time missionaries? Yes No	-	-	-				
Address	-						
Email address Home phone Cellphone Last name Last name Relationship Type Address (if different than your permanent address) City State ZIP							
Parent or guardian information: First name			•				
Parent or guardian information: First name							
Relationship TypeAddress (if different than your permanent address)	'		'				
CityStateZIP	· ·						
Parent email address			•				
Home phone							
Please list the name and high school graduation year of younger siblings: Sibling name							
Sibling name	•		•				
Sibling name		,	, ,				
Sibling name D.O.B HS graduation year Has a family member attended Friends University? \(\text{ Yes } \) No \(\text{ If yes, please list their name and relationship to you.} \) Name Relationship Are either of your parents pastors or full-time missionaries? \(\text{ Yes } \) No							
Has a family member attended Friends University? — Yes — No — If yes, please list their name and relationship to you. Name							
Name Relationship Are either of your parents pastors or full-time missionaries? Yes No							
Are either of your parents pastors or full-time missionaries? □ Yes □ No	•	•					
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Background Information

These questions comply with the U.S. Department of Education's standards for ethnic and racial data collection. Providing the information below is voluntary and will not be used in a discriminatory manner.

Providing the information be	now is voluntary and will not be	used in a discriminatory manne	: 1.
Are you Hispanic/Latino? □Ye	es 🗆 No		
Select one or more of the fol	lowing racial categories to descr	ibe yourself:	
□ American Indian or Alaska N	Jative □ Black or African-Americ	an □ White	
□ Asian □ Native Hawaiian or			
considered complete. Pay by contact the Registrar's Office a follow up from your assigne	No \$50 application fee required credit card or cash in person - If on campus. After a payment reced Friends University representat	you choose to make a payment ceipt is received by Admissions	t in person you may Processing you will receive
Education Information	mation		
High school		City	State
Graduation date (MM/YYYY)	/ 🗆 GED? GED d	late (MM/YYYY)/	
ACT/SAT taken? □Yes □ No □ Planning to retake? Date	ACT Comprehensive Score	SAT Comprehensive Sco	re
	ducation institutions that you have a college credit. You must have transo		
Institution name	City	State	
Institution name	City	State	
your top three by indicating 1	k your intended major and concer , 2, 3.	ntration if required. If more than	n one major, please rank
Bachelor of Arts Art *	Liberal Studies	Bachelor of Science	Health Management
Graphic Design	Music *	Accounting	Health Sciences
Studio	Music in Worship	Biochemistry Biology *	Human Services-Psychology * Psychology
Art Education (Grades PreK-12)	Music TheatreReligion and Philosophy	General Biology	Psychology Human Services
Communications *	Spanish	Biology Education	Industrial Psychology
Media Studies	Spanish Education	Secondary Education (Grades 6-12)	International Business
Visual Communications Criminal Justice *	Secondary Education (Grades PreK-12)	Business Administration *	Liberal Studies Marketing
Criminal Justice *	Speech/Theatre Education Secondary Education (Grades 6-12)	Human Resource Management	Marketing Math Education
Behavioral	Theatre	Management Operations Management	Secondary Education (Grades 6-12)
English *		Chemistry *	Mathematics *
Literature	Bachelor of Music	Chemistry	Professional Mathematics
Writing	General Music Education	Forensic Science	Computer SciencePre-Engineering
English Language Arts Ed	(Grades PreK-12) Instrumental Music Education	Health Professions	Mechanical Engineering
Secondary Education (Grades 6-12)	(Grades PreK-12)	Computer Systems &	Physical Education Teacher
History and Politics * American History & Politics	Music Performance *	Information Systems Conservation Science	Education (Grades PreK-12)
Global History & Politics	Instrumental Jazz Performance	Cyber Security *	Radiologic Technology (2+2)
Law & Public Policy	Instrumental Performance Piano Performance	Business	Zoo Science Undecided
Sociology and Social Services	Vocal Performance	Math and Science	Secondary Major
Diversity Studies	Vocal Music Education	Elementary Education	_ Christian Spiritual Formation
Family Studies	(Grades PreK-12)	(Grades K-6) Finance	Secondary Major Only
Social Services		— Health and Physical Education	+ Companyation D

* Concentration Required

Planning to participate in: **Fine Arts Men's Varsity Athletics Women's Varsity Athletics Extracurricular Activities** ■ Basketball ☐ Art □ Baseball □ Campus ministries □ Basketball Competitive cheer Community Service ■ *Band □ Competitive cheer ☐ Cross country Debate Communications: ☐ Cross country □ Golf □ Forensics Media □ Football □ Powerlifting ☐ Multicultural Engagement Visual ☐ Golf □ *Pep band □ Soccer □ Concert Choir □ Powerlifting Softball □ Student government Part _ Soccer □ Tennis ☐ Drama/Theatre □ Tennis ☐ Track and Field *Jazz Band ☐ Track and field ■ Vollevball Keyboard ■ Wrestling ■ Wrestling *Instrument: _ *Orchestra Singing Quakers **Enrollment Information** When do you plan to attend? □ Fall □ Spring □ Summer Year: 20____ Where will you live while attending Friends University? □ On campus □ Off campus Will you be applying for Financial Aid? □Yes □No Are you applying for admission to other colleges or universities? ☐ Yes ☐ No If yes, please list. If you would like information on services for students with disabilities, please contact your admission counselor or call the ADA Services office at 316-295-5522. Signature The mission of Friends University is to equip students to honor God and serve others by developing their intellectual, spiritual and professional lives. With my signature, I affirm that the information given on this application is complete and correct to the best of my knowledge. I understand that Friends University has the right to select for admission students who demonstrate the ability to succeed and have the potential to benefit from the mission of the University. Student signature_

Wichita Main Campus 2100 W. University Ave., Wichita, KS 67213 800-577-2233 | 316-295-5100 friends.edu | admissions@friends.edu





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