



Mail to, ADMISSIONS  
**OUACHITA HILLS COLLEGE**  
 P. O. Box 170 Amity, AR 71921 USA  
 870.342.6210 FAX 870.342.9569

## APPLICATION FOR ADMISSION

### I. PERSONAL INFORMATION

Legal Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Permanent Address: Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Male/Female Date of Birth (MM/DD/YY) \_\_\_/\_\_\_/\_\_\_ Birth Place, City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Marital Status: \_\_\_ Single \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced Number of dependent children \_\_\_\_\_

*Applicants with children should refer to the OHC Student Handbook for applicable admission requirements.*

Citizenship Country and State/Province \_\_\_\_\_

#### NON-US Citizens

Are you a permanent resident of the United States? ..... YES / No

If YES, state Country \_\_\_\_\_ Alien Card Number \_\_\_\_\_

If NO, please indicate your Visa type \_\_\_\_\_

Native Language \_\_\_\_\_ Years of study in an English-speaking school \_\_\_\_\_

List languages in which you are fluent \_\_\_\_\_

*Your response to the following is voluntary and will be used in a nondiscriminatory manner consistent with applicable civil rights laws.*

- \_\_\_ Black / African American    \_\_\_ Native American    \_\_\_ Asian / Pacific Islander  
 \_\_\_ Hispanic    \_\_\_ White / Caucasian    \_\_\_ Other / Unknown

Have you ever been suspended, dismissed, or asked to withdraw from high school of college? ..... YES / NO

If YES, please give the date and nature of offence \_\_\_\_\_

Do you have an unpaid school account? ..... YES / NO

School \_\_\_\_\_ Amount owed \$ \_\_\_\_\_

Have you ever been convicted of any crime (other than traffic violations) or sentenced to a corrective institution? .. YES / NO

If YES, please give the date and nature of offense \_\_\_\_\_

Have you used alcohol, tobacco, or other mind-altering drugs in the past two years? ..... YES / NO

Church Membership: Date of Baptism \_\_\_\_\_ By Whom \_\_\_\_\_

SDA YES / NO Other \_\_\_\_\_

### II. ENROLLMENT

Anticipated date of enrollment: Fall Semester (August) \_\_\_\_\_ Year \_\_\_\_\_ Spring Semester (January) \_\_\_\_\_ Year \_\_\_\_\_

Applications should be submitted by the following dates: Fall, July 31; Spring, December 1.

Type of enrollment you seek:     New college entrance                       Transfer student                       Auditing only

Degree you seek:

- Associate of Arts in Personal Ministries
- Bachelor of Arts in Biblical Studies
- Bachelor of Arts in Theology
- Bachelor of Arts in Business Management
- Bachelor of Arts in Religious Studies (*with emphasis in . . .*)
  - Elementary Education (*choose one content area*)
  - Secondary Education (*choose two content areas*)
    - Religion
    - Social Studies
    - English
    - Math
    - Business
    - Biology
    - Chemistry

Credit hours you plan to take:     12 or more (full time)                       6-11 (half time)                       1-5 (less than half time)

**III. EDUCATIONAL HISTORY**

Have you previously attended Ouachita Hills Academy or College?    YES / NO    Which? \_\_\_\_\_ Year(s) \_\_\_\_\_

List each academy, college, or university you have attended, beginning with the most recent.

Institution	City	State	Country	Degree	Year Grade	Dates of Attendance

Tests you have taken:     SAT     ACT     GED  
     Michigan Test for English                       TOEFL     CLEP

***Please send test results to ADMISSIONS at Ouachita Hills College***

**IV. WORK EXPERIENCE**

Please list establishments where you have worked, beginning with the most recent.

Position	Employer	Name and Address	(MM/YY) to (MM/YY)

Are you presently employed? ..... YES / NO

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Do you have a journeyman or higher trade skills? ..... YES / NO

List skills with office or outdoor equipment with which you have had experience for one or more years \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**V. REFERENCES**

The enclosed Reference Forms must be sent to the following people. If you would like to send Reference Forms to others, please list their names and addresses on a separate sheet of paper. References from relatives will not be accepted.

1. Instructor (within the last 2 years). If homeschooled, Sabbath School or Music Teacher
2. Minister/Pastor or Head Elder
3. Employer or Work Supervisor
4. (If applicable) Academy Dean or Advisor

Do you know anyone living at Ouachita Hills College or Academy? \_\_\_\_\_ If so, who? \_\_\_\_\_

Who interested you in Ouachita Hills College? \_\_\_\_\_

**VI. FINANCIAL**

Who will be responsible for your Ouachita Hills account?

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

What amount of your educational fees each year do you expect to be paid by your own work? .... \$ \_\_\_\_\_

What amount of your educational fees do you expect to receive from outside sources? ..... \$ \_\_\_\_\_

Are you expecting to take part in the Colporteur Scholarship Program as outlined in the OHC Student Handbook? YES / NO

**VII. SELF-EVALUATION**

Please answer the following questions as thoroughly and yet as briefly as possible. Use a separate sheet of paper if necessary.

1. Do you know Jesus Christ?      Yes / No  
2. How do you know for sure? \_\_\_\_\_  
\_\_\_\_\_

3. Do you take time for personal Bible study and prayer?                      Daily                      Sometimes                      Never

4. How would you describe your familiarity with the Bible? \_\_\_\_\_  
\_\_\_\_\_

5. How would you describe your familiarity with the Spirit of Prophecy writings? \_\_\_\_\_  
\_\_\_\_\_

6. Describe how the Bible and Spirit of Prophecy have impacted your life. \_\_\_\_\_  
\_\_\_\_\_

7. Which of OHC's principles/standards do you value the most?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. What aspects of OHC might you have challenges with?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. What hobbies and recreational activities do you enjoy ? \_\_\_\_\_  
\_\_\_\_\_

10. Please respond to the following paragraph.  
    Ouachita Hills College seeks to provide an education founded on the Word of God as seen in the Bible and the Spirit of Prophecy. Spiritual, physical, emotional, and intellectual growth will be emphasized. Dating, competitive sports, and artificial amusements are not part of student life on our campus.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. In a paragraph or two explain why have you chosen to seek admission to Ouachita Hills College? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. What do you expect to gain during the time you spend as a student at Ouachita Hills College? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ESSAY:** On a separate sheet of paper, please (1) give a brief biographical account of yourself, and (2) describe your educational and career goals. The length should be 1-2 pages. This essay must be your own work. You may not get help from another person.

**VIII. APPLICANT'S SIGNATURE**

When you have read and understood all the information in this **APPLICATION FOR ADMISSION** and in the **OUACHITA HILLS COLLEGE STUDENT HANDBOOK** please enter your signature and the date on the appropriate lines below.

I certify that the above statements are correct and complete. I understand that incomplete or false information may make me ineligible for admission to, or continuing my education at, Ouachita Hills College.

Signature \_\_\_\_\_

Date \_\_\_\_\_