$LEE \oint UNIVERSITY$

LEE ONLINE APPLICATION FOR ADMISSION

To be eligible for admission, applicant must have graduated from an approved high school or satisfactorily completed the GED test									
	AND have three	(3) years of Life E	xperience	beyond high s	chool graduati	on			
	R of ARTS (B.A.) degr		n of 6 seme	ster hours credit	of intermediate				
PROGRAM OF STUDY (MA	JOR):	CHRISTIAN S		_	LIBERAL STU	DIES			
MINISTRY LE	ADERSHIP ALSO	Check ONE of the fol	llowing Min	istry Leadershi	p Areas of Empl	nasis:			
Church Administration	Counseling	Discipleship	🗋 Musi	e & Worship	Pastoral	Ministry 🔲 Youth Ministry			
GOVERNMENT ISSUED ID I APPLICATION FOR ENROLI MY STATUS WILL BE:			G FALL	SPRI		MER '-TIME (11 HOURS OR LESS)			
PERSONAL DATA (PLEASI	E PRINT OR TYPE):		L HOUKS O	K WORE)		- TIME (TT HOURS OK LESS)			
FULL LEGAL NAME: CURRENT ADDRESS:	LAST NAME	FIRST NA		MID	DLE NAME	(MAIDEN NAME)			
PERMANENT ADDRESS:	CITY		STATE			ZIP CODE			
EMAIL ADDRESS:	CITY		STATE			ZIP CODE			
HOME PHONE: () RELIGIOUS AFFILIATION: _ CHURCH NAME:)			
BACKGROUND INFORMATION:		U.S. CITIZENFOREIGN CITIZEN:		U.S. PERMANENT CITIZEN (GREEN CARD) COUNTRY OF CITIZENSHIP: COUNTRY OF BIRTH:					
		TYPE OF VISA:		Given F-1 (STUE		□ B-1 (VISITOR/TOURIST)			
ENGLISH IS MY FIRST LAN	GUAGE:	U YES		D NO					
OPTIONAL (for statistical purposes only): ETHNIC GROUP: AFRICAN AMERICAN AMERICAN INDIAN ASIAN AMERICAN HISPANIC		DIAN	 BLACK INTERNATIONAL CAUCASIAN – WHITE EAST INDIAN - INTERNATIONAL OTHER (specify)		ΓΕ ERNATIONAL	 NATIVE HAWAIIAN WHITE INTERNATIONAL ASIAN INTERNATIONAL 			
GENDER: DALE	G FEMALE	_/	MARITA	L STATUS: //	SINGLE	MARRIED			
EMERGENCY CONTACT I NAME:	NFORMATION:			_ RELATIONS		NT:			
CITY/STATE/ZIP:									

HOME PHONE: (______) _____ WORK PHONE: (______)

NOTE: Official transcripts must be received directly from schools attended. HS transcript and College Entrance Exam Scores may also be required.

NAME OF HIGH SCHOOL						
ADDRESS						
PHONE: ()						
GRADUATION DATE://	_/ 🗖 PUBLI	C 🗋 CHRISTIAN 🗋 G.E.D. 🗋 P	RIVATE	HOME S	CHOOL	
COLLEGE ENTRANCE EXAMS: ACT	TAKEN	PLAN TO TAKE ON	<u> </u>	/		
(FOR DEGREE SEEKING ONLY) SAT	TAKEN	PLAN TO TAKE ON	<u> </u>	/		
LIST ALL COLLEGES/UNIVERSITIES CURRE	ENTLY OR PREVIOUSLY	ATTENDED (BEGINNING WITH '	THE MOST	RECENT):	
NAME OF INSTITUTION	CITY/STATE	HRS EARNED (SEM/QTR)	ATTENDED (MM/YY)			
		/	/	TO	/	
		/	/	то	/	
		/	/	то	/	
		/	/	то	/	
DEGREE HELD (IF ANY):	<u> </u>	DATE COMPLETED:				
		_	_			
FINANCIAL AID INFORMATION: I PLAN			🗆 NO			
* Contact Lee University Fi	nancial Aid Office at 1-800	-533-9930 or via e-mail at finaid@leeu	university.ed	u		
I AM QUALIFIED AND PLA	N TO APPLY FOR VETER	ANS BENEFITS: 🔲 YES **	🗖 NO			
)-533-9930 or via e-mail at veterans@	leeuniversity	.edu		
GENERAL INFORMATION:						
HAVE YOU PREVIOUSLY APPLIED TO LEE UN	IVERSITY?	□ YES	🗆 NO			
HAVE YOU BEEN CONVICTED OR INDICTED F				IOLATION	N ?	
		T YES	🗆 NO			
AFFIRMATION:						
WHAT PERSON OR EVENT INFLUENCED YOU	TO APPLY TO LEE UNIV	ERSITY?				
I AM CHOOSING LEE UNIVERSITY BECAUSE:						
As a Christian University. Les maintains contain star	darde which are required -f -	very member of our community area if	they differ f	om norser	al convicti-	
As a Christian University, Lee maintains certain stand preferences. My signature indicates that I understand	I that I am to be governed by	the principles and expectations outlined				
Community Covenant. Failure to comply with these	standards will result in discip	pline by the university.				
By making this request for admission, I indicate my s	support for the standards set a	at Lee University.				
Circus J.			4	,	,	
Signed:		Da	e:		_/	
Please subm	it along with the \$25 $LEE \oint UNI$	Advance Matriculation Fee to	:			

LEE ONLINE PO Box 3450 Cleveland, TN 37320-3450 Phone: 1-800-LEE-9930