



Honors Institute Admission Application

Office Use only:

GPA: _____
EVC units: _____
Initials: _____
Date: _____

Please print clearly and answer all questions front and back.

PERSONAL INFORMATION

Today's Date: _____

Name: _____
(Last) (First) (Middle)

Student ID #: _____

Current Address: _____
(Street) (City) (State) (Zip)

Permanent Address: _____
(Street) (City) (State) (Zip)

Phone Number: () _____ - _____ () _____ - _____ () _____ - _____
(Daytime) (Evening) (Pager/Cell)

E-mail Address: _____

EDUCATIONAL INFORMATION

EVC Cumulative GPA: _____ Units Completed: _____ Major/Degree: _____

EVC Goals: Certificate 2-Year Degree Transfer to 4-Year Undecided

Planned Transfer Date: ____/____/____ Transfer School: _____

DEMOGRAPHIC INFORMATION (OPTIONAL)

Date of Birth: ____/____/____ Gender: _____ Ethnicity: _____

BIOGRAPHICAL INFORMATION

Accomplishments/Awards/Recognition (Community, Campus, Personal. Use additional page if necessary): _____
