

FRANKLIN COLLEGE



APPLICATION FOR RUNNING START

This application should be completed only by **Junior or Senior high school students** wishing to participate in Franklin College's Running Start program. Students with a cumulative GPA of 3.0 or better and a strong counselor recommendation will be considered for the program. Degree-seeking students must complete the regular application for admission.

Name _____
First Middle Initial Last

Address _____

City _____ State _____ Zip Code _____

Home Phone Number (_____) _____ County _____

E-mail Address _____

Male _____ Female _____ Birth date (ex. 06/02/88) _____ SSN _____ - _____ - _____
(If enrolled SSN will be needed for tax purposes)

Legal Guardian Name _____

Legal Guardian Address _____

US Citizen Yes _____ No _____ Religion (optional) _____

Please check one of the following to describe yourself (optional):

White, Non-Hispanic _____ Asian or Pacific Islander _____
Black, Non-Hispanic _____ American Indian or Alaskan Native _____
Hispanic _____ Other (please describe) _____

Entry Term: Fall (Aug.-Dec.) _____ Spring (Feb.-May) _____ Summer Session (June & July) _____

High School / Home-schooled _____ Year of Graduation _____

In order of preference, in which course(s) do you intend to enroll? (Based on available class space)

1. _____ 2. _____

Are you planning to audit these courses or do you wish to receive grade/credit? Audit _____ Grade/Credit _____

On a separate sheet of paper, please tell us about yourself, your educational objectives, your goals in life and your reasons for applying to Franklin College's Running Start program. Your statement will be used in considering your admission to the program.

I do hereby certify to the best of my knowledge that the preceding statements are true and complete.

Signature of applicant _____ Date _____

* Please submit this application to your high school guidance counselor or home-school teacher for his/her recommendation. The \$40 application fee should be paid by check made out to Franklin College and included with your application.

COUNSELOR RECOMMENDATION

Student's GPA: _____ Is the GPA weighted? Yes _____ No _____

Does the school rank students? Yes _____ No _____ If yes, what is the student's rank? _____ in a class of _____

Is this student expected to graduate with an Indiana Academic Honors Diploma? Yes _____ No _____

Is this student expected to complete CORE 40? Yes _____ No _____

Has this student successfully passed the ISTEP examination? Yes _____ No _____

In comparison to other college-bound students at your school, would you say this student's course selection is:

Most demanding _____ Demanding _____ Average _____ Below Average _____

_____ I recommend this student for special admission to Franklin College's Running Start Program.

_____ I do not recommend this student for special admission to Franklin College's Running Start Program.

_____ This student meets the Franklin College Running Start Program minimum GPA qualifications of 2.5.

Counselor's Comments

Counselor (Printed) _____ Phone # _____

Counselor Signature _____ Date _____

Please return this application, \$40 application fee (check made out to Franklin College), Transcript and any additional information to:

Office of Admissions, Franklin College, 101 Branigin Blvd., Franklin, IN 46131