

# Gardner-Webb University

P.O. Box 817, Boiling Springs, North Carolina 28017 USA

1 -800-253-6472 704-406-4498 704-406-4488 *fax*

www.gardner-webb.edu Email: admissions@gardner-webb.edu

---

Thank you for your interest in Gardner-Webb University. We welcome your application.

- A. If you are applying as a Freshman, you should ask your high school to send us your high school transcript, including your SAT and/or your ACT scores, and your class rank.
- B. If you are applying as a Transfer student, you should request official transcripts from all high schools and colleges you have attended. No high school transcripts are required if you are transferring 30 or more hours.
- C. Attach a recent photograph (if available) to the application.
- D. Mail the completed application to:

Gardner-Webb University  
Undergraduate Admissions  
P.O. Box 817  
Boiling Springs, NC 28017-0817 USA

- E. A \$40 processing fee is required. Applying online is free at <https://gwustream.gardner-webb.edu/onlineapp.aspx>.
- F. Fields marked with an \* are required.
- G. International students should submit the printable International application.

## APPLICATION FOR ADMISSION

Name\*: \_\_\_\_\_  
*First Middle Last Suffix*

Preferred Name: \_\_\_\_\_

### Student Personal Information

Date of Birth\* (mm/dd/yyyy): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Gender\* (please circle):      Female      Male

Ethnicity: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Marital Status (please circle):    Single    Married    Separated    Divorced    Other

### Contact Information

Street\*: \_\_\_\_\_

City\*: \_\_\_\_\_      State\*: \_\_\_\_\_

Zip Code\*: \_\_\_\_\_

County (if residing in North Carolina): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Mobile Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address\*: \_\_\_\_\_

IM Screen Name: \_\_\_\_\_

### Demographic Information

Are you a U.S. Citizen\* (please circle):    Yes            No

    If no, are you a permanent resident (please circle):    Yes        No

        If no, you must complete the international application.

        If yes, what is your card number? \_\_\_\_\_

        Country of Citizenship: \_\_\_\_\_

Religious Preference: \_\_\_\_\_

Are you the first to attend college in your immediate family?            Yes        No

Did anyone in your family attend Gardner-Webb (please circle)?    Yes        No

If Yes, please list their names and graduation dates: \_\_\_\_\_

\_\_\_\_\_

### Academic Information

I plan to start coursework at GWU\* (please circle):    Summer    Fall    Spring    20\_\_\_\_

I plan to study (please circle)\*:    Full time            Part time

Do you plan to live in a residence hall\* (please circle)?    Yes        No

I plan to major in\*: \_\_\_\_\_

I plan to enroll as a\* (please circle):    Freshman    Sophomore    Junior    Senior

SAT date (mm/dd/yyyy): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

ACT date (mm/dd/yyyy): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Most recent High School / College Information**

Anticipated High School graduation date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name, City, State, and year of your High School(s)\* attended:

---

---

If applicable, Name, City, State and year of colleges attended\*:

---

---

---

**Extra Curricular Activities / Honors**

In this section, please use additional paper if necessary.

I am being recruited by GWU to participate in NCAA Division I athletics (circle): Yes No

If yes, please list the sport(s): \_\_\_\_\_

Please list your Academic Honors: \_\_\_\_\_

---

---

---

Please list the High School Activities and Sports in which you participated:

_____	_____
_____	_____
_____	_____
_____	_____

Please list your Volunteer Experiences: \_\_\_\_\_

---

---

---

---

---

---

---

---

Please include any additional information you would like us to have in reviewing your application: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

---

---

Gardner-Webb University supports the attainment of equal opportunity for all persons regardless of race, sex, national origin, age or disability. The University is committed to compliance with the American Disabilities Act of 1990 as amended, and Section 504 of the Rehabilitation Act of 1973. Federal law prohibits the University from making inquiries regarding admission, but the information voluntarily given will not affect any admission decision and will be used to assist students. If upon admission you require services because of a disability, you should notify the office of the Noel Programs for the Disabled at Gardner-Webb University.

By signing this Application, I certify that all answers and statements made in this application are true. If accepted, I agree to abide by the rules and regulations of the University as set forth in the catalog and other official publications of the University.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Gardner-Webb University  
Undergraduate Admissions  
P.O. Box 817  
Boiling Springs, North Carolina 28017  
USA

1 -800-253-6472  
1 -704-406-4498  
1 -704-406-4488 *fax*

Email: [admissions@gardner-webb.edu](mailto:admissions@gardner-webb.edu)

Website: [www.gardner-webb.edu](http://www.gardner-webb.edu)

Attach photo here  
(optional)