

Student Questionnaire

Applicant's Name _____ Date _____

Why do you want to attend Pathways School of Excellence?

What do you do in your free time?

What is your favorite hobby or sport?

What is your favorite musical group or favorite singer?

What is your favorite TV show?

Do you read for pleasure? Yes No

If yes, what have you read recently?

Do you play sports or exercise regularly? Yes No

If yes, what sport do you play?

Do you spend time with friends outside of school? Yes No

If yes, what do you like to do with your friends?

How often do you spend time with your friends?

Once a week 2-3 times a week Once a month

What do you do when you spend time with your friends?

Discuss two of your goals for the future.

1. _____
2. _____

Use this section to share any additional information not previously included.

Transition Only: What would you like to learn about in a college class?

Transition Only: What do you want to learn that you have not learned in high school?

Transition Only: What kind of job(s) are you interested in after you leave the university?

I, on behalf of myself or as parent or guardian of the student applicant, hereby certify that all statements on this application are true and correct. I understand that admission to and subsequent enrollment in Pathways School of Excellence at Southeastern University depends upon the accuracy of the information provided on this application. I understand that any falsification, misrepresentation, or omission of facts will result in the denial of admission to the program, or dismissal from the program if already admitted. If the Admission Committee deems it necessary, I authorize a thorough investigation to be made in connection with this application concerning the applicant's character, general reputation, personal characteristics, employment, education background, and criminal record, whichever may be applicable.

I, on behalf of myself or as parent or guardian of the student applying for admission, specifically authorize any employer, law enforcement agency, local, state, and federal, and references to release any and all information requested by The Pathways School of Excellence concerning my admission. I understand this investigation may include interviews with third parties such as family members, church leaders, educators, employers, friends, neighbors and others with whom the applicant is acquainted. I also affirm that if accepted for admission, the applying student will abide by the policies of Pathways School of Excellence and Southeastern University, including but not limited to the principles set forth in the Southeastern University Vision Statement, Life Statement, Community Covenant, and other expectations as outlined in the Southeastern University Student Handbook.

I have read and affirm as my own the above statements.

Applicant's Printed Name

Applicant's Signature (if possible)

Date

Parent/Guardian's Printed Name

Date

Parent/Guardian's Signature

Date

Relationship to Applicant