



OKLAHOMA WESLEYAN
U · N · I · V · E · R · S · I · T · Y

Please Return to:
Oklahoma Wesleyan University
2201 Silver Lake Road
Bartlesville, OK 74006

1-866-222-8226 or 918-335-6219
Fax: 918-335-6229

admissions@OkWU.edu
www.OkWU.edu

Please Print in
Ink or Type

Application for Concurrent Enrollment

Complete this form and return it to the OWU Enrollment Services Office

PERSONAL INFORMATION

Name: _____
Last Name First Nickname

Address: _____
Street Address or PO Box # City State Zip

Home Phone: _____ Soc. Sec. #: _____ Birthdate: _____

Country of Citizenship (if other than the United States): _____ Email Address: _____

Gender: Male Female I plan to enter OWU's Concurrent Program: Fall Spring Summer 20 _____

Are you considering attending OWU as a full-time student after graduation?: Yes No Maybe

Check is applying for the Worldview Academy Location _____

Have you ever attended Oklahoma Wesleyan University before?: Yes No If yes, when?: _____

Church Name _____ Denomination: _____

Student's Signature

Date

ACADEMIC INFORMATION

High School: _____

Address: _____
Street Address or PO Box # City State Zip

Phone: _____ Graduation Date: _____ Counselor: _____

High School Cumulative Grade Point Average: _____ Area(s) of Academic Interest: _____

ACT Composite Test Score _____ Extracurricular Interests: _____

SAT Composite Test Score _____

Other Academic Information: _____

COUNSELOR APPROVAL

This is to certify that _____ is a (Junior, Senior) at
_____ High School and should complete graduation
requirements by spring commencement of (20 ____). This student has a grade point average of _____.
He/She is enrolled for ____ high school subjects this semester and thus is eligible to take ____ credit
hours at Oklahoma Wesleyan University. His/Her ACT/SAT composite score is _____.

Signature of High School Counselor

Date