



## APPLICATION

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Last Name

First

Middle

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Address

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City

State

Zip

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Area Code and Telephone Number

---

E-Mail Address

---

Social Security Number (Optional)

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High School Graduation Date

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Anticipated Major

The Residential College residence hall rooms are double occupancy. If you have a roommate preference, indicate that person's name.

**NOTE: Your roommate must also be chosen to participate in the Residential College program.**

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Name of roommate preference

**Please complete the following on a separate sheet of paper:**

1. What are your interests and hobbies?
2. What are your career/life goals?
3. Please list your awards and activities, leadership experiences, volunteer activities, and community service completed during high school.

Residential College  
Southern Arkansas University  
P.O. Box 9412  
Magnolia, AR 71754

**We will begin reviewing Residential College applications on February 27, 2006.**