

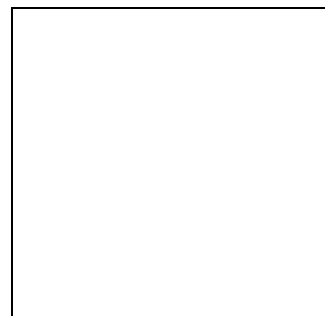


OMEGA COLLEGE

STUDENT APPLICATION FORM

LAST NAME _____ FIRST NAME _____ INITIAL _____

STUDENT No. _____



Complete the Application for Admission and return it to Omega College along with the following fees (excluding VAT):

Application Fee	\$25.00
Transcript Evaluation Fee	\$50.00 (<i>per college transcript submitted</i>)
Advising Fee	\$100.00 (<i>applied to tuition</i>)

APPLICATION DOCUMENTS:

1. Two passport-sized color photographs.
2. Copy of birth certificate or valid passport pages showing name, number, photo and expiration date.
3. Copy of Immigration document(s).
4. Copy of your National Insurance card.
5. High School Diploma / Leaving Certificate
6. Official high school transcript / BJC and BGCSE/CXC/SAT certificate(s)
7. Official College/University transcripts.
8. Copy of College/University degree.
9. Two (2) Character reference letters. One from your current employer and one from a professional individual of good standing within the community who knows you (*e.g. priest/minister, Member of Parliament, Justice of the Peace, leader of a civic organization of which you are a part, etc.*).
10. Current police record
11. A completed Omega College Student Health Information Form. (Required upon acceptance)

Transcripts and other credentials that you wish to submit in support of your application may be sent directly to: Omega College, P.O. Box N-8439, Bernard Road, Fox Hill Nassau, The Bahamas. (*All documents become the property of Omega College and will not be returned*).

For Office Use ONLY

Amt & Receipt # _____	Received by _____	Date Received _____
High School Transcript _____	Unofficial _____	
College Transcript #1 _____	Unofficial _____	
College Transcript #2 _____	Unofficial _____	
Photographs _____	NIB Card _____	Passport _____
Reference Letters	1. _____	1. _____
	2. _____	2. _____

PERSONAL INFORMATION (please type or print in BLOCK CAPITALS)

Mr./Ms./Mrs./Dr./Rev. (Please circle)

Family Name/Surname	First	Middle
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Indicate any other name (married, maiden, adoptive) which may appear on your credentials:

Address: House #	Street	Apt #
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City	Island/State/Province	Country
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P.O. Box/Postal Code	() Home Phone	() Work Phone
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() Cell Phone	Email address (required)
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Date of birth ____ / ____ / ____ MM / DD / YY	Place of birth
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Gender ☐ Male ☐ FemaleCitizenship ☐ Bahamian ☐ Other (specify country): _____Marital status ☐ Single ☐ Married ☐ Divorced ☐ Widowed No. of dependents _____

Occupation _____ Employer and Dept. _____

Have you ever been convicted of a crime, other than a traffic offence? ☐ Yes ☐ No

If yes, please explain:

ALTERNATE AND EMERGENCY CONTACTS:

Name	Relationship	Home Phone	Work Phone
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Name	Relationship	Home Phone	Work Phone
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Name	Relationship	Home Phone	Work Phone
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The following Information is for statistical purposes only: How did you learn about Omega College?

☐ Radio ☐ Newspaper Advertisement ☐ Flyer ☐ Internet ☐ Relative/Friend☐ Omega College student (specify) _____☐ Other (specify) _____

EDUCATIONAL BACKGROUND

List below in chronological order every high school and college/university you have attended. (*Please do not use acronyms or abbreviations*) You may use a separate sheet of paper to explain what you have done since leaving school or during gaps between schooling. Remember to print your name and the type of program you are interested in on any separate sheets of paper.

Name of Institution	City/State/Country	Dates of Attendance	Diplomas/Certificates/Degrees Received

BGCSE/GCE grades:

[illegible]

ANTICIPATED ENROLLMENT AND FUNDING

☐ Full- time ☐ Part-time

☐ Fall 20____ ☐ Spring 20____ ☐ Summer 20____

Anticipated program (if known) _____

How do you plan to fund your program?

☐ Personal funds ☐ Scholarship from _____

☐ Bank Loan ☐ Government Education Loan

☐ Employer reimbursement (*please provide contact information*):

Name Title

Department Work Phone & Ext.

☐ Relatives (*please provide contact information*):

Name Relationship Home Phone

House # Street Apt#

P.O. Box City Island/Province/State Country

Employer & Dept. Work Phone & Ext.

☐ Other (*specify source*):

On occasion, students may need family members/friends to collect documents from the Business Office on their behalf. Please list below any individuals that Omega College may release information to without your prior written consent:

Name _____ Name _____

I CERTIFY THAT the information given in this application is complete and correct. I further understand that falsification or failure to supply the correct information may lead to the disqualification of my application for admission to OMEGA COLLEGE. I understand that OMEGA COLLEGE reserves the right to reject any application and is under no obligation to show cause for non-acceptance. I understand that I am responsible for the forwarding of official transcripts from schools I have attended and that the transcripts become the property of OMEGA COLLEGE and will not be returned. I accept full responsibility for the settlement of all debts incurred.

Signature of applicant _____ Date / /
MM / DD / YY

Signature of parent/guardian _____ Date / /
(Required if applicant is under the age of 18) MM / DD / YY

I hereby give OMEGA COLLEGE permission to use my likeness in any promotional or news release generated by OMEGA COLLEGE or any agent appointed by OMEGA COLLEGE. _____
(Please initial if you agree)

I hereby give OMEGA COLLEGE permission to print my name in regard to any honors I receive or activities in which I participate. _____
(Please initial if you agree)