



# Worldview Academy

**Transfer credits to any college you wish to attend.** This is possible because Corban University is accredited with the Northwest Commission on Colleges and Universities (NWCCU).

## **Eligibility**

- A. Students must be registered for and accepted to attend a 2018 WVA seminar.
- B. Students must be entering their Senior or Junior year of high school and be at least 16 years of age.
- C. Students must be in good academic standing at their school of attendance. If the high school does not have a stated standard for good academic standing students must have at least a C average.

## **Enrollment Process is simple:**

- A. Complete the Worldview Application for Concurrent Enrollment.  
A star (\*) indicates that the information is necessary in order to process your application.
- B. Obtain a copy of your high school transcript and submit with your completed application. A copy is acceptable.
- C. Submit all forms to the Office of the Registrar at Corban University prior to the start of WVA seminar. Send to the address below.

### **Please return to:**

Corban University, Attn: Office of the Registrar, 5000 Deer Park Drive SE, Salem, OR 97317

Contact information: 503-375-7017 / registrar@corban.edu



# Worldview Application for Concurrent Enrollment

## PERSONAL INFORMATION

*First Name:		*Last Name:		*Middle Name:	
*Date of Birth:		*SSN: (required)		*Phone:	
*Current Address:					
*City:		*State:		*ZIP Code:	
*Email:			*Country of Citizenship:		
*Gender: Male Female (please Circle)		*I plan on attending Worldview camp on ____/____/____.			
*Worldview Academy Location:					
Are you considering attending Corban as a full-time student after graduation? Yes No Maybe (please circle)					
*Have you ever attended Corban University before? Yes No (please circle) If yes, when?					
Church Name:			Denomination:		
*Student Signature:					*Date:
Corban University admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the college. It does not discriminate on the basis of race, color, national origin, or sex in any of its policies, practices, or procedures.					

## ACADEMIC INFORMATION

*High School:					
*Street Address:					
*City:		*State		*ZIP Code:	
*Phone:		*Graduation Date:		*Counselor:	
*High School Cumulative Grade Point Average:			Area(s) of Academic Interest:		

## PARENTAL APPROVAL

*I give my consent for (student)_____ to apply for academic credit at Corban University. I understand this requires Corban to create a student record for the above named student.	
*Signature of Parent:	*Date:

### **Please Return to:**

Corban University Attn: Office of the Registrar, 5000 Deer Park Drive SE, Salem, OR 97317  
 Contact us at: 503-375-7017 / registrar@corban.edu