



POLK STATE

Honors Program

PROVISIONAL ADMISSION APPLICATION

Please print, complete, and return this application to any Polk State College advisor.

Student Information:

Name: _____ Student ID: _____

Address: _____

Cell Phone: _____ Polk State College Email Address: _____

Program/Major: _____ Anticipated Graduation Date: _____

High School: _____ Year Graduated: _____
Name City/State

Previous College(s) _____ Dates Attended: _____

Admission Options for the Honors Program are listed below. Please check the option below that you are closest to meeting and provide your information.

- ___ **Unweighted** High School GPA of 3.5 or higher on 4-point scale..... GPA: _____
- ___ SAT combined score of 1100 or higher in Mathematics and Critical Reading SAT Score: _____
- ___ ACT composite score of 25 or higher ACT Score: _____
- ___ College GPA of 3.2 or higher GPA: _____
- ___ PERT score of 120 or above on Writing and Reading..... Writing: _____
Reading: _____

I give permission to Polk State College to use my image for institutional and/or educational purposes only. (This includes, but is not limited to, use on the Polk State website and/or other electronic and print media.)

Please provide a statement (approximately one page) explaining the value of joining the Honors Program and why you should be admitted on a provisional basis.

By my signature below, I confirm that the information I have provided on this application is accurate and complete. I give permission for the college administration to talk to my previous or current Polk State faculty about my academic performance. I understand that if admitted provisionally to the Honors Program, I must earn a 3.2 or higher GPA in the semester provisional admission is granted, which must include at least one Honors course. I also understand that if full admission is granted, I must earn a minimum of 18 credit hours with the Honors Program designation and graduate from Polk State College with a cumulative GPA of 3.2 to complete the requirements of the Honors Program.

Student Signature

Date

I have verified the entrance requirement listed by the student and attest that the student qualifies for the Polk State College Honors Program.

Advisor Signature

Advisor Printed Name

Date

Advisors: Please return this form to **Megan Cavanah**, mcavanah@polk.edu or **Station #14**
For more information, students may contact honors@polk.edu