

## **Application for the Mott Honors College**

Name:	Student ID:		
Address:(St	reet)		(Apt.)
(City)	(State)		(Zip)
Phone:	ne:(Home) (Cell)		
Email Address:			
Name of High School:			
Cumulative GPA (mini	mum of 3.5):		
Cumulative college cre	edits earned:		
Academic major or pro	gram (if decided):		
Associate Degree sou	ght:		
Assoc in Applied Science in:			
Assoc	in Arts		Assoc in Science
Assoc i	n General Studies		No degree sought from MCC
Higher educa	ation and/or employme	nt plans <u>a</u>	fter Mott Community College:

Return this **Application** and a **500-word Essay** to:

Dr. Brian Ivory, Coordinator of the Mott Honors College 2011 Mott Library Mott Community College 1401 E. Court Street Flint, MI 48503