



Note: This form MUST be completed entirely for acceptance consideration.

- Regular Decision, Restrictive Action, Info Required, Final Decision

For Administration Only

Please type or print neatly

I am applying for the term beginning

Desired Program

Possible Career Plans

Personal Information

Please enter your name as it appears on your passport or other official documents.

Legal Name Last(Family) First Middle Suffix (Jr., Sr., etc.) Male Female

Preferred Name

Previous LastName(s), if any

Date of Birth (mm/dd/yyyy)

Social Security Number (optional) (###-##-####)

Email

Marital Status (single, married, etc.)

Permanent Address

Street Address Apt. #

City/Town State/Province Country Zip/Postal Code

Phone Begin with Area or County Code

Alternate Phone Begin with Area or Country Code

Please give your current address for all admission correspondence, if different from above.

Current Mailing Address

Street Address Apt. #

City/Town State/Province Country Zip/Postal Code

Current Mailing Address Phone Begin with Area or County Code

Current Mailing Address Valid From (mm/dd/yyyy) to (mm/dd/yyyy)

Citizenship

Place of Birth City/Town State/Province Country

US Citizen Dual US citizen; please specify other country of citizenship

US permanent resident visa; citizen of Alien registration number

Other Citizenship/Work Visa Information

If you live in the United States, but are not a U.S. citizen, how many years have you lived in the country _____

If not English, What language is spoken in your home _____

If not English, List your first language _____

Ethnicity

Race/Ethnicity information is optional. Information you provide will not be used in a discriminatory manner.

Are you Hispanic or Latino? Yes No (country of family's origin _____)

How would you describe your racial background? (Select one or more of the following categories):

Asian

Black or African American

American Indian or Alaska Native

Native Hawaiian or Other Pacific

White

Family Information

Parent/Guardian #1

Parent Guardian _____
Title Last (Family) First Middle Suffix

Male Female

If different from yours

Address _____
Street Address Apt. #

City/Town State/Province Country Zip/Postal Code

Phone _____ Email _____
Begin with Area or Country Code

Profession _____ Position _____

Employer _____

Parent/Guardian #2

Parent Guardian _____
Title Last (Family) First Middle Suffix

Male Female

If different from yours

Address _____
Street Address Apt. #

City/Town State/Province Country Zip/Postal Code

Phone _____ Email _____
Begin with Area or Country Code

Profession _____ Position _____

Employer _____

With whom do you reside? Both Parent/Guardian #1 Parent/Guardian #2 Other (Explain) _____

Academic Information

School _____

Type of school: Public Private Correspondence Charter Parochial Home-School

School Address _____
Number and Street

City/Town State/Province Country Zip/Postal Code

Start Date _____
(mm/yyyy)

Date of Graduation _____
(mm/yyyy)

Counselor's Name _____

Phone _____
Begin with Area or Country Code

Counselor's Email _____

Fax _____
Begin with Area or Country Code

(Please send official transcripts)

Are you currently enrolled in school? Yes No Will/did you graduate from High School early? Yes No

Did you receive a GED? Yes No If so, list date: _____
(mm/yyyy)

If your education has been interrupted, please detail your activities since last enrolled. Please attach your response to the end of the application.

Current Year's Courses

Please list name, level (Honors, AP, IB, etc.) and credit value of your current year's courses.

Semester #1/Trimester #1	Semester #2/Trimester #2	Trimester #3
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all other high schools, colleges/universities (including summers), and academic programs you attended, beginning with ninth grade. You must submit transcripts from each school.

Other High Schools

School Name	Dates Attended	Location
_____	_____	_____
_____	_____	_____
_____	_____	_____

Colleges/Universities

School Name

Dates Attended

Location

Extracurricular and Volunteer Information (including summer)

Please list any significant extracurricular or community activities and hobbies in which you have participated. Include specific accomplishments such as musical accolades, athletic distinctions, etc. **(Please note: "PG" means Post High School Grad)**

Activity	Grade Level	Specific Accomplishments	Hours/ Week	Weeks/ Year	Currently Participating
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> PG	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Employment Information

List any work experience (including summer jobs) during the past three years.

Employer	Job Description	Dates of Employment	Hours per week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Additional Information

If you have additional information that was not specifically requested on the application or did not fit in the space provided, feel free to include it here. **If you need more space, please attach your response to the end of the application.**

Discipline Information

Have you ever been placed on probation, suspended, removed, dismissed or expelled from any school or academic program since 9th grade?

Yes No

Other than traffic offenses, have you ever been convicted of any misdemeanor, felony, or other crime?

Yes No

If you answered yes to either question, please provide an explanation and the approximate dates of each incident. **Please attach your response to the end of the application if needed.**

Authorization

Your signature below

1. Authorizes all schools you attended to provide all requested records and allow review of your application for the admission process chosen on this application.

2. Confirms all information in this application (including any supplemental information) is factually true and honestly presented and that you are the person submitting this application. If any information is found other than true, student/parent/guardian is fully responsible for subsequent actions.

Signature of applicant _____

Date _____

(Printed Name) applicant _____

Date _____

Signature of Parent/Guardian _____

Date _____

(Printed Name) Parent/Guardian _____

Date _____