

SAINT PETER'S COLLEGE

SCHOOL OF PROFESSIONAL & CONTINUING STUDIES

INSTRUCTIONS FOR THE APPLICANT

1. Arrange to have your official high school transcript and/or any college transcripts sent to:
Office of Graduate and Professional Studies Admission.
Saint Peter's College, 2641 Kennedy Boulevard, Jersey City, NJ 07306.
2. Answer truthfully and completely all questions on this application and return it to the address above.
3. Call the office at 201.761.6470 if you have any questions.

GENERAL INFORMATION

Anticipated Start Term: Fall 1 (Aug/Sept) Fall 2 (Oct/Nov) Spring 1 (Jan) Spring 2 (Feb/Mar)

Summer 1 (May) Summer 2 (July)

Year: 2011 2012 2013

Status: Full-time Part-time

First Time Student Transfer Student Returning SPC Student

Campus: Jersey City Englewood Cliffs Corporate Site: _____

PERSONAL INFORMATION

Social Security Number _____ Date of Birth _____

Applicant's Full Legal Name _____

Permanent Home Address _____

Telephone Number (____) _____ Work Number (____) _____

E-mail Address _____

Citizenship Status: U.S. Citizen Non U.S. Citizen Country of Citizenship _____

U.S. Permanent Resident

Visa classification _____ Place of Birth _____

Former/Maiden name _____

OTHER INFORMATION

How did you learn about Saint Peter's College? _____

Response to the following questions in this section is voluntary and the information will be kept confidential.

Refusal to provide this information will not affect an applicant adversely.

Gender: Female Male

Veteran's Status: Student is not a veteran Student is a veteran Student is a dependent of a veteran

Ethnicity: Are you Hispanic or Latino? Yes No

If you wish to be identified with a particular ethnic group, please select the choice that most accurately describes your heritage.

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White

Religion: Catholic Jewish Protestant Other None

Marital Status: Single Married Divorced Widowed

ADDITIONAL INFORMATION

In the event we are unable to contact you or in case of emergency, please provide a name, address and telephone number of a relative not living with you.

Name _____ Relationship _____

Address _____ Telephone (____) _____

REQUIREMENTS FOR ADMISSION

- A completed application
- **Transcripts:** SPC requires an official copy of your high school transcript, G.E.D. or college transcript, however, an unofficial transcript may be presented for admissions purposes.

First-time students: please request from your high school that a copy be forwarded to the address below.

Transfer: please request from all colleges you have attended that a copy be forwarded to the address below.

Saint Peter's College Office of Graduate and Professional Studies Admission

2641 Kennedy Boulevard, Jersey City, NJ 07306

ACADEMIC INFORMATION

Please list all college, business, technical or nursing schools you are currently attending or have attended.

Please have official transcripts from each school forwarded to the office.

Institution	County, State or Country	Credits Earned	Degree
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Name and address of high school: _____

Secondary Education:

- High School Graduate Year of Graduation _____ Private Public
 Equivalency Diploma
 Not a high school or equivalency graduate

Have you previously applied to Saint Peter's College? Yes No

Have you ever attended or received credits from Saint Peter's College? Yes No

PLANS OF STUDY

- Associate of Applied Science (AAS):**
 Health Sciences (Holy Name Hospital students only)
 Public Policy (Jersey City only)
- Bachelor of Arts (BA):**
 Criminal Justice
 Elementary Education
- Bachelor of Professional Studies (BPS):**
 Humanities
 Interdisciplinary Studies
 Social Sciences
- Bachelor of Science (BS):**
 Urban Studies/Public Policy Sequence (Jersey City only)
- Bachelor of Science in Business Administration (BSBA):**
 Accounting
 Business Management
 Health Care Management
 Marketing
- Bachelor of Science in Nursing (BSN):**
 RN to BSN Completion-Express Track (Englewood Cliffs only)
 RN to BSN Completion-Evening Track (Englewood Cliffs only)
- Bachelor Program: Undecided Major**

EMPLOYER INFORMATION

Saint Peter's College honors employer-sponsored tuition reimbursement programs. If interested, please complete the following section.

Name of Employer _____

Employer Address _____

Telephone # and extension _____

If percentage is paid by employer: What type of courses: All courses Job-related courses

Have you ever been convicted of a crime other than a misdemeanor or traffic violation? Yes No

If you answered "yes" to the question above please submit a full statement of the relevant facts on a separate sheet of paper.

Applicant's Signature

I certify that the information on this application is true and correct to the best of my knowledge. Accordingly, I understand and agree that any misrepresentation or omission of facts in my application will justify the denial or the rescission of admission. I agree that, if I am accepted, I will comply with all the rules and regulations of Saint Peter's College, and that my admission, matriculation, and graduation are subject to the control of the authorities of Saint Peter's College.

Signature of Applicant _____ Date _____

Saint Peter's College is an Affirmative Action/Equal Opportunity Employer/Institution. It does not discriminate on the basis of sex, marital status, race, color, religion, age, national origin, handicap, or veteran's status.

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Office of Graduate and Professional Studies Admission • (201) 761-6470 • www.spc.edu