

SAINT PETER'S COLLEGE

MY APPLICATION FOR ADMISSION

(PERSONAL INFORMATION)

Name _____ Gender: Male Female
LAST FIRST MIDDLE MAIDEN PREFERRED NAME

Permanent Address _____
STREET APT # CITY STATE ZIP CODE

Home Telephone Number _____ Cell Phone _____
AREA CODE AREA CODE

Date of Birth _____ E-mail Address _____

U.S. Citizen Yes No If no, please indicate country of origin _____
REQUIRED FOR SOME CORRESPONDENCE

I plan to attend Saint Peter's College as a: Resident Alien _____
PLEASE SPECIFY ALIEN REGISTRATION NUMBER

Non-resident Alien requesting I-20 form for Student Visa

Non-resident Alien with other Visa _____
PLEASE SPECIFY ALIEN REGISTRATION NUMBER AND VISA TYPE

When do you expect to enter Saint Peter's College? Fall Spring Year _____

Enrolling as: Freshman Transfer Full Time Part Time

(ENROLLMENT PLANS)

What are you considering as a field of study at Saint Peter's College? Your major(s) _____
REFER TO WWW.SPC.EDU TO EXPLORE OUR MAJORS

Extracurricular Interests _____

Are you requesting campus housing? Yes No Undecided

For New Jersey residents only: Are you interested in the Educational Opportunity Fund (EOF) Program?
(EOF is a selective opportunity for academically and economically disadvantaged students to attend college in New Jersey) Yes No

(ACADEMIC HISTORY)

Primary High School _____ High School CEEB Code _____

Years of Attendance _____ Date of Graduation _____ Cumulative GPA _____
MONTH/YEAR

Name of your Guidance Counselor _____ Guidance Counselor E-mail Address _____

If you have taken the ACT or SAT more than once, please provide your best score in each area.

SAT _____ Critical Reading _____ Math _____ Writing _____
DATE TAKEN

ACT _____ Composite _____ Did you take Advanced Placement courses? Yes No
DATE TAKEN

Extracurricular Activities (including leadership positions) _____

Academic Awards or Recognition _____

Have you earned college credits at a 2-year or 4-year institution? Yes No Name of Institution _____ Credits Earned _____

(ADDITIONAL REQUIREMENTS)

1. Personal Essay: What do you see as the greatest challenge to face your generation? (For more essay options, please visit www.spc.edu/essay)
2. Official Test Scores
3. Two Letters of Recommendation (see attached)
4. Official Transcripts

(FAMILY INFORMATION)

Parent 1 Relationship: _____ Living? Yes No

Name _____
FIRST LAST MIDDLE

E-mail Address _____

Primary Phone Number _____

Occupation _____

Marital Status:

Married Single Divorced Remarried Separated (legally)

Are you a first generation college student? Yes No

Are either of your parents employed by Saint Peter's College? Yes No

What language, other than English, is spoken in your home? _____

Parent 2 Relationship: _____ Living? Yes No

Name _____
FIRST LAST MIDDLE

E-mail Address _____

Primary Phone Number _____

Occupation _____

Marital Status:

Married Single Divorced Remarried Separated (legally)

(VOLUNTARY INFORMATION)

The following information is optional and will not be used to determine your eligibility for admission. Your responses will only be used to gather statistics regarding the demographics of our students.

Social Security Number _____ - _____ - _____

1. Are you Hispanic/Latino? Yes, Hispanic or Latino (including Spain) No

2. Regardless of your answer to the prior question, please select one or more of the following ethnicities that best describe you:

American Indian or Alaska Native (including all Original Peoples of the Americas)

If yes, please enter Tribal Enrollment Number _____

Asian (including Indian subcontinent and Philippines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

White (including Middle Eastern)

Other (please describe) _____

Religious Affiliation: Catholic Protestant Jewish Hindu Muslim Buddhist Other _____

For informational purposes only, to what other colleges/universities are you applying? _____

Are you related to any Saint Peter's College alumni? _____
ALUMNUS NAME RELATIONSHIP YEARS ATTENDED

(ADDITIONAL INFORMATION)

Have you ever been convicted of a felony or of a misdemeanor (other than minor traffic offenses)? Yes No

If yes, please submit a full statement of the relevant facts on a separate sheet of paper.

Have you ever been disciplined for misconduct, suspended, expelled or required to withdraw from any secondary or post-secondary institution? Yes No

If yes, please submit a full statement of the relevant facts on a separate sheet of paper.

(APPLICANT SIGNATURE)

IMPORTANT: You MUST sign the application. All documents pertaining to your application become the property of Saint Peter's College.

I authorize Saint Peter's College to contact my high school and obtain my transcript.

To the best of my knowledge, the information given above is true. I understand that misrepresentation of facts on this application will be cause for refusal of admission, cancellation of admission, or suspension from Saint Peter's College. By signing this application, I agree to abide by the policies and regulations of the institution.

I further agree and certify that Saint Peter's College may publish for public relations/advertising purposes my photograph or photographs in which I appear.

SIGNATURE

DATE

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

SAINT PETER'S COLLEGE

COUNSELOR RECOMMENDATION AND TRANSCRIPT REQUEST

(FOR YOU, THE APPLICANT, TO COMPLETE)

Student Name _____

Permanent Address _____

Home Telephone Number _____ Cell Phone _____

I hereby waive my right to review this form after completion.

Signature _____ Date _____

Current year courses — please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year.

First Semester/Trimester

Second Semester/Trimester

Third Trimester

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(FOR YOUR GUIDANCE COUNSELOR TO COMPLETE)

Attach applicant's official transcript, including courses in progress, a school profile, and transcript legend. (Please check transcript copies for readability.) After filling in the blanks below and on reverse, use both sides of this form to describe the applicant. Please provide all available information for this candidate. Be sure to sign on reverse.

Class rank _____ in a class of _____, High School graduation date: _____

covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

The rank is weighted unweighted. How many students share this rank? _____

If a precise rank is not available, please indicate rank to the nearest tenth from the top _____

Cumulative GPA _____ on a _____ scale, covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

This GPA is: weighted unweighted. The school's passing mark is _____

Percentage of graduating class attending: _____ four-year _____ two-year institutions

In comparison with other college preparatory students at our school, the applicant's course selection is:
 most demanding very demanding demanding average less than demanding

(continued on reverse)

SAINT PETER'S COLLEGE

COUNSELOR RECOMMENDATION AND TRANSCRIPT REQUEST

Counselor's Name (please print or type) _____

Signature _____ Date _____

Position _____ School _____

Counselor's School Address _____

Counselor's E-mail Address _____

Counselor's Phone () _____ Counselor's Fax () _____

High School CEEB Code _____

Evaluation

Compared to other college-bound students in his or her secondary school class, how do you rank this student in terms of:

No Basis		Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
	Academic achievement							
	Extracurricular accomplishments							
	Personal qualities and character							
	Creativity							

I recommend this student: With reservation Fairly strongly Strongly Enthusiastically

How long have you known this student and in what context? _____

What are the first words that come to your mind to describe this student? _____

Please write whatever you think is important about this student, including a description of academic and personal characteristics. We welcome information that will help us to differentiate this student from others. (Please attach additional sheets if necessary.)

When completed, please return to: Saint Peter's College, Office of Admission, 2641 Kennedy Boulevard, Jersey City, NJ 07306 OR fax to 201. 761. 7105

CONFIDENTIALITY: We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at a member college. In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students do have access to their permanent files, which may include forms such as this one. Unless required by state law, colleges may not provide access to admission records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation. These colleges are committed to administer all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, handicap, sexual orientation or gender. The admission process at private undergraduate institutions is exempt from the federal regulation implementing Title IX of the Education Amendments of 1972.

SAINT PETER'S COLLEGE

RECOMMENDATION FORM

(FOR YOU, THE APPLICANT, TO COMPLETE)

Student Name _____

Permanent Address _____

Home Telephone Number _____ Cell Phone _____

I hereby waive my right to review this form after completion.

Signature _____ Date _____

(FOR YOUR ACADEMIC REFERENCE TO COMPLETE)

Academic Reference's Name (please print or type) _____

Signature _____

Position _____ School _____

Academic Reference's School Address _____

Academic Reference's E-mail Address _____

Academic Reference's Phone () _____ Academic Reference's Fax () _____

High School CEEB Code _____

Academic Reference Evaluation

Compared to other college-bound students in his or her secondary school class, how do you rank this student in terms of:

	No Basis	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
Academic achievement								
Extracurricular accomplishments								
Personal qualities and character								
Creativity								

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