

APPLICANT

Legal name \_\_\_\_\_  
Last/Family/Sur (Enter name exactly as it appears on official documents.) First/Given Middle (complete) Jr., etc.

Preferred name, if not first name (choose only one) \_\_\_\_\_ Former last name(s), if any \_\_\_\_\_

Birth date \_\_\_\_\_  Female  Male US Social Security Number, if any \_\_\_\_\_  
mm/dd/yyyy Optional, unless applying for US Federal financial aid with the FAFSA form

E-mail address \_\_\_\_\_ IM address \_\_\_\_\_

Permanent home address \_\_\_\_\_  
Number & Street Apartment #

\_\_\_\_\_  
City/Town County or Parish State/Province Country ZIP/Postal Code

Preferred Telephone  Home  Cell Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code Area/Country/City Code

If different from above, please give your current mailing address for all admission correspondence.

Current mailing address (from \_\_\_\_\_ to \_\_\_\_\_)  
(mm/dd/yyyy) (mm/dd/yyyy) Number and Street Apartment #

\_\_\_\_\_  
City/Town County or Parish State/Province Country ZIP/Postal Code

If your current mailing address is a college or university, include name of school here: \_\_\_\_\_

FUTURE PLANS

Your answers to these questions will vary for different colleges. If the online system did not ask you to answer some of the questions you see in this section, this college chose not to ask that question of its applicants.

College \_\_\_\_\_ Deadline \_\_\_\_\_  
mm/dd/yyyy

Entry Term:  Fall (Jul-Dec)  Spring (Jan-Jun) Do you intend to apply for need-based financial aid?  Yes  No

Academic Interests \_\_\_\_\_ Do you intend to apply for merit-based scholarships?  Yes  No

\_\_\_\_\_ Do you intend to be a full-time student?  Yes  No

\_\_\_\_\_ Do you intend to enroll in a degree program your first year?  Yes  No

Career Interest \_\_\_\_\_ Do you intend to live in college housing? \_\_\_\_\_

\_\_\_\_\_ What is the highest degree you intend to earn? \_\_\_\_\_

DEMOGRAPHICS

Citizenship Status \_\_\_\_\_

Non-US Citizenship \_\_\_\_\_

Years lived in the US? \_\_\_\_\_

Birthplace \_\_\_\_\_  
City/Town State/Province Country

First Language \_\_\_\_\_

Primary language spoken at home \_\_\_\_\_

Are you proficient in any other languages? \_\_\_\_\_

**Optional** The items with a gray background are optional. No information you provide will be used in a discriminatory manner.

Marital Status \_\_\_\_\_

Religious Preference \_\_\_\_\_

US Armed Services veteran?  Yes  No

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

2. Regardless of your answer to the prior question, please indicate how you identify yourself. (Check all that apply.)

American Indian or Alaska Native (including all Original Peoples of the Americas)  
 Are you Enrolled?  Yes  No 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)

## FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section online, or on an attached sheet if applying via mail.

### Household

Parents' Marital Status (relative to each other):  Never married  Married  Widowed  Separated  Divorced (date \_\_\_\_\_)

With whom do you make your permanent home?  Parent 1  Parent 2  Both  Legal Guardian  Ward of the Court/State  Other mm/yyyy

**Parent 1:**  Mother  Father  Unknown

Is Parent 1 living?  Yes  No (Date Deceased \_\_\_\_\_)  
mm/yyyy

**Parent 2:**  Mother  Father  Unknown

Is Parent 2 living?  Yes  No (Date Deceased \_\_\_\_\_)  
mm/yyyy

\_\_\_\_\_  
Last/Family/Sur                      First/Given                      Middle                      Title (Mr./Ms./Dr., etc.)

Country of birth \_\_\_\_\_

Home address **if different** from yours  
\_\_\_\_\_  
\_\_\_\_\_

Preferred Telephone:  Home  Cell  Work

(\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

College (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

Graduate School (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_  
Last/Family/Sur                      First/Given                      Middle                      Title (Mr./Ms./Dr., etc.)

Country of birth \_\_\_\_\_

Home address **if different** from yours  
\_\_\_\_\_  
\_\_\_\_\_

Preferred Telephone:  Home  Cell  Work

(\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

College (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

Graduate School (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

### Legal Guardian (if other than a parent)

Relationship to you \_\_\_\_\_

\_\_\_\_\_  
Last/Family/Sur                      First/Given                      Middle                      Title (Mr./Ms./Dr., etc.)

Home address **if different** from yours  
\_\_\_\_\_  
\_\_\_\_\_

Preferred Telephone:  Home  Cell  Work

(\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

College (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

Graduate School (if any) \_\_\_\_\_ CEEB \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

### Siblings

Please give names and ages of your brothers or sisters. If they are enrolled in grades K-12 (or international equivalent), list their grade levels. If they have attended or are currently attending college, give the names of the undergraduate institution, degree earned, and approximate dates of attendance. If more than three siblings, please list them in the Additional Information section.

\_\_\_\_\_  
Name    Age & Grade    Relationship

College Attended \_\_\_\_\_ CEEB \_\_\_\_\_

Degree earned \_\_\_\_\_ Dates \_\_\_\_\_  
or expected mm/yyyy – mm/yyyy

\_\_\_\_\_  
Name    Age & Grade    Relationship

College Attended \_\_\_\_\_ CEEB \_\_\_\_\_

Degree earned \_\_\_\_\_ Dates \_\_\_\_\_  
or expected mm/yyyy – mm/yyyy

\_\_\_\_\_  
Name    Age & Grade    Relationship

College Attended \_\_\_\_\_ CEEB \_\_\_\_\_

Degree earned \_\_\_\_\_ Dates \_\_\_\_\_  
or expected mm/yyyy – mm/yyyy



**Honors** Briefly list any academic distinctions or honors you have received since the 11<sup>th</sup> grade or international equivalent (e.g. National Merit, Cum Laude Society).

Grade level					Honor	Level of Recognition			
11	12	FY	SO	JR		School	State/ Regional	National	Inter- national
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE

**Extracurricular** Please list your **principal** extracurricular, volunteer, and work activities **in their order of importance to you**. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). **To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.**

Grade level					Approximate time spent		When did you participate in the activity?		Positions held, honors won, letters earned, or employer	If applicable, do you plan to participate in college?
11	12	FY	SO	JR	Hours per week	Weeks per year	School year	Summer/ School Break		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____	_____	<input type="radio"/>	<input type="radio"/>	_____	<input type="radio"/>
Activity _____										

## WRITING

**Short Answer** Please briefly elaborate on one of your extracurricular activities or work experiences in the space below or on an attached sheet (150 words or fewer).

**Personal Essay** This personal essay helps us become acquainted with you as a person and student, apart from courses, grades, test scores, and other objective data. It will also demonstrate your ability to organize your thoughts and express yourself.

**Please provide a statement (250 words minimum) that addresses your reasons for transferring and the objectives you hope to achieve, and attach it to your application before submission.** *NOTE: Your Common Application essay should be the same for all colleges. Do not customize it in any way for individual colleges. Colleges that want customized essay responses will ask for them on a supplement form.*

**Additional Information** If there is any additional information you'd like to provide regarding special circumstances, additional qualifications, etc., please do so in the space below or on an attached sheet.

### Disciplinary History

- ① Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from 9<sup>th</sup> grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal, or expulsion from the institution?  Yes  No
- ② Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime?  Yes  No  
[Note that you are not required to answer “yes” to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered “yes” to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

## SIGNATURE

**Application Fee Payment** If this college requires an application fee, how will you be paying it?

- Online Payment  Will Mail Payment  Online Fee Waiver Request  Will Mail Fee Waiver Request

### Required Signature

- I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree should the information I have certified be false.
- I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.
- I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature 

Date \_\_\_\_\_  
mm/dd/yyyy

*Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.*



# Supplemental Application for Undergraduate Admission

## Personal Information

Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
First Middle Last Mo / Day / Yr

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

For text updates, please provide the name of cell phone carrier: \_\_\_\_\_

### Student Type

Freshman  College transfer  Nursing transfer (Autumn only)  Post-baccalaureate

### Quarter/Year Applying For

Autumn (September) Year \_\_\_\_\_  Winter (January) Year \_\_\_\_\_  Spring (March) Year \_\_\_\_\_  Summer (June) Year \_\_\_\_\_

### Decision Plan (check one)

Early Action (November 15th): Seattle Pacific University is one of my top choice schools.  Regular Decision

NOTE: Early Action applicants may only apply for Autumn quarter.

How did you first learn about Seattle Pacific University? \_\_\_\_\_

What was the most important factor in your decision to apply for admission? \_\_\_\_\_

If you plan to apply for a scholarship with ROTC, which branch will you apply?  Air Force  Army

If you have already applied for ROTC, when did you apply? \_\_\_\_\_  
Mo / Day / Yr

## Family Information

If you listed siblings (high school age or younger) under the family section of the Common Application, please indicate if they have the same address as you:  Y  N

If your father is an alumnus of SPU, what year did he graduate? \_\_\_\_\_

If your mother is an alumna of SPU, what year did she graduate? \_\_\_\_\_

Is one or both of your parents **employed full-time** with a Christian church, mission, or para-church organization?  Y  N

Have you been in foster care in Washington State for at least one year since your 16th birthday?  Y  N

## Educational Information

Intended major \_\_\_\_\_ If undecided, what subject area or career interests you? \_\_\_\_\_

Please indicate the number of college credits you anticipate earning before enrolling at SPU: \_\_\_\_\_

Are you participating in the Washington State Running Start Program?  Y  N

## Optional Information

To what other colleges do you plan to apply?

_____	_____	_____	_____	_____	_____	_____	_____	_____
<small>School</small>	<small>City</small>	<small>State</small>	<small>School</small>	<small>City</small>	<small>State</small>	<small>School</small>	<small>City</small>	<small>State</small>

In which of the following areas would you like to participate? (Check as many as apply.)

- |                                    |                                     |   |   |  |
|------------------------------------|-------------------------------------|---|---|--|
| <input type="checkbox"/> Band      | <input type="checkbox"/> Theatre    | <input type="checkbox"/> University/ Urban Ministry | <input type="checkbox"/> Student Publications | <input type="checkbox"/> Multi-Ethnic Programs |
| <input type="checkbox"/> Choir     | <input type="checkbox"/> Visual Art | <input type="checkbox"/> International Missions     | <input type="checkbox"/> Student Leadership   | <input type="checkbox"/> Intramural Sports     |
| <input type="checkbox"/> Orchestra | <input type="checkbox"/> Debate     | <input type="checkbox"/> Honors Programs            | <input type="checkbox"/> Study Abroad         | <input type="checkbox"/> NCAA Athletics        |

Name of church you attend \_\_\_\_\_ Denomination \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Please describe how you are involved at your church: \_\_\_\_\_

### Personal Statement

In addition to the Common Application essay, please respond to the following (in 250 – 500 words) on a separate sheet of paper:

While SPU does not require a profession of Christian faith for admission, we seek to admit students who will best succeed in and benefit from a Christian learning environment. Please describe your own belief system and how the idea of engaging the culture and changing the world plays out in your own life.

### Person of Influence

In addition to your academic recommendation, please identify a non-family member (minister, youth worker, or professional associate) who has had a positive impact on you. Provide contact information, and briefly explain why you have listed this person.

Name \_\_\_\_\_ Organization \_\_\_\_\_ Position \_\_\_\_\_ SPU Alum?  Y  N

Address \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Signature

I am aware of the standards for student conduct outlined in the online SPU Undergraduate Catalog under “Student Life: Community Standards and Policies” and agree to support these expectations and values.

Legal Name of Applicant (Please Print) \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

### Nondiscrimination Policy

Seattle Pacific University does not discriminate on the basis of race, color, national origin, sex, age, or disability in policies and practices, as required by applicable laws and regulations. As a religious educational institution, SPU is permitted and reserves the right to prefer employees or prospective students on the basis of religion. For the full Nondiscrimination Policy visit [www.spu.edu/hr](http://www.spu.edu/hr).

**TO THE APPLICANT**

After completing all the relevant questions below, give this form to an instructor who has taught you a full-credit college class. If applying via mail, please also give that instructor stamped envelopes addressed to each institution that requires an Instructor Evaluation.

Legal name \_\_\_\_\_  Female  
Last/Family/Sur (Enter name **exactly** as it appears on official documents.) First/Given Middle (complete) Jr., etc.  Male

Birth date \_\_\_\_\_ mm/dd/yyyy Social Security # \_\_\_\_\_ (Optional)

Address \_\_\_\_\_  
Number & Street Apartment # City/Town County or Parish State/Province Country ZIP/Postal Code

College or university you now attend \_\_\_\_\_ CEEB/ACT code \_\_\_\_\_


**IMPORTANT PRIVACY NOTE:** By signing this form, I authorize all schools that I have attended to release all requested records covered under the Federal Educational Rights and Privacy Act (FERPA) so that my application may be reviewed by the Common Application member institution(s) to which I am applying. I further authorize the admission officers reviewing my application, including seasonal staff employed for the sole purpose of evaluating applications, to contact officials at my current and former schools should they have questions about the school forms submitted on my behalf.

I understand that under the terms of the FERPA, after I matriculate I will have access to this form and all other recommendations and supporting documents submitted by me and on my behalf, unless at least one of the following is true:

1. The institution does not save recommendations post-matriculation (*see list at [www.commonapp.org/FERPA](http://www.commonapp.org/FERPA)*).
2. I waive my right to access below, regardless of the institution to which it is sent:

Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.


No, I do *not* waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

**Required Signature**  \_\_\_\_\_ Date \_\_\_\_\_

**TO THE INSTRUCTOR**

The Common Application membership finds candid evaluations helpful in choosing from among highly qualified candidates. You are encouraged to keep this form in your private files for use should the student need additional recommendations. Please submit your references promptly, and remember to sign below.

Instructor's name (Mr./Ms./Dr., etc.) \_\_\_\_\_ Subject taught \_\_\_\_\_  
Please print or type

Signature  \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

College or university \_\_\_\_\_

School address \_\_\_\_\_  
Number & Street City/Town State/Province Country ZIP/Postal Code

Instructor's telephone (\_\_\_\_\_) \_\_\_\_\_ Instructor's e-mail \_\_\_\_\_  
Area/Country/City Code Number Ext.

**Background Information**

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? \_\_\_\_\_

List the courses you have taught this student, noting for each the student's year in school (first-year, sophomore, etc.) and the level of course difficulty (100-level, 200-level; etc.).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Ratings** Compared to other students to whom you have taught this class, how do you rate 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 I've encountered (top 1%)
Academic achievement								
Intellectual promise								
Quality of writing								
Creative, original thought								
Productive class discussion								
Respect accorded by faculty								
Disciplined work habits								
Maturity								
Motivation								
Leadership								
Integrity								
Reaction to setbacks								
Concern for others								
Self-confidence								
Initiative, independence								
OVERALL								

**Evaluation** Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

TO THE APPLICANT

This form must accompany an official copy of your transcript and must be completed by a college official(s) who has access to your academic record and your disciplinary record. Please follow these steps to ensure the form is completely accurately and in its entirety. **Step 1:** Complete all relevant questions below, including the signature statement. **Step 2:** Give this form to a dean or college official who has access to your academic record and ask that official to complete the academic portion of this form. **Step 3:** If the official completing the academic portion does not also have access to your disciplinary record, please ask the individual to securely forward the form to a second official who can answer those questions before duplicating this form and mailing it to your colleges along with copies of your official transcript(s).

Legal name \_\_\_\_\_  Female  
Last/Family/Sur (Enter name exactly as it appears on official documents.) First/Given Middle (complete) Jr., etc.  Male

Birth date \_\_\_\_\_ Social Security # \_\_\_\_\_  
mm/dd/yyyy (Optional)

Address \_\_\_\_\_  
Number & Street Apartment # City/Town County or Parish State/Province Country ZIP/Postal Code

College/university you now attend \_\_\_\_\_ CEEB/ACT code \_\_\_\_\_

Current year courses—please indicate title, level, and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

First Semester/Quarter	Grade	Second Semester/Quarter	Grade	Third Quarter	Grade
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

How many college credits have you earned prior to this academic year? \_\_\_\_\_ How many college credits will you earn this academic year? \_\_\_\_\_


**IMPORTANT PRIVACY NOTE:** By signing this form, I authorize all schools that I have attended to release all requested records covered under the Federal Educational Rights and Privacy Act (FERPA) so that my application may be reviewed by the Common Application member institution(s) to which I am applying. I further authorize the admission officers reviewing my application, including seasonal staff employed for the sole purpose of evaluating applications, to contact officials at my current and former schools should they have questions about the school forms submitted on my behalf.

I understand that under the terms of the FERPA, after I matriculate I will have access to this form and all other recommendations and supporting documents submitted by me and on my behalf, unless at least one of the following is true:

- The institution does not save recommendations post-matriculation (see list at [www.commonapp.org/FERPA](http://www.commonapp.org/FERPA)).
- I waive my right to access below, regardless of the institution to which it is sent:

Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.


No, I do *not* waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

Required Signature  \_\_\_\_\_ Date \_\_\_\_\_

TO THE COLLEGE OFFICIAL

If you have access to the applicant's academic record and disciplinary record, please complete this form in its entirety. Attach the applicant's official transcript (check copies for readability). Use both pages to complete your evaluation for this student, and be sure to sign below. If you have access to the applicant's academic record only, please complete the relevant portion of this form, then forward to the appropriate official for completion of the disciplinary questions, asking that official to mail the form to the applicant's colleges after doing so.

College official's name (Mr./Ms./Dr., etc.) \_\_\_\_\_  
Please print or type

Signature  \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

Title \_\_\_\_\_ College or university \_\_\_\_\_

College or university address \_\_\_\_\_  
City/Town State/Province Country ZIP/Postal Code

College official's telephone (\_\_\_\_\_) \_\_\_\_\_ College official's fax (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code Number Ext. Area/Country/City Code Number Ext.

College or university CEEB/ACT code \_\_\_\_\_ College official's e-mail \_\_\_\_\_  
mm/dd/yyyy

## Background Information

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 \_\_\_\_\_.

Highest GPA in class \_\_\_\_\_ Graduation date \_\_\_\_\_  
(mm/dd/yyyy)

**School Seal**

If you know this student, please indicate for how long and in what context. \_\_\_\_\_

If you know this student, what are the first words that come to your mind to describe this student? \_\_\_\_\_

**Ratings** Compared to other students in his or her class year, how do you rate 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 I've encountered (top 1%)
Academic achievement								
Extracurricular accomplishments								
Personal qualities and character								
<b>OVERALL</b>								

**Evaluation** Please provide comments that will help us differentiate this student from others. Feel free to attach an additional sheet or another reference you've prepared for this student. We especially welcome a broad-based assessment and encourage you to consider describing or addressing:

- The applicant's academic, extracurricular, and personal characteristics.
- Relevant context for the applicant's performance and involvement, such as particularities of family situation or responsibilities, work obligations, or other circumstances, either positive or negative.
- Observed problematic behaviors, perhaps separable from academic performance, that an admission committee should explore further.

If you are completing only the questions pertaining to the applicant's disciplinary record, please provide the following information:

College official's name (Mr./Ms./Dr., etc.) \_\_\_\_\_  
Please print or type

Signature  \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

Title \_\_\_\_\_ College official's e-mail \_\_\_\_\_

College official's telephone (\_\_\_\_\_) \_\_\_\_\_ College official's fax (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code Number Ext. Area/Country/City Code Number Ext.

① Is this applicant in good academic standing?  Yes  No

② Is this applicant eligible to return to your school?  Yes  No

If you answered no to either or both questions, please attach a separate sheet of paper or use your written recommendation to provide details.

① Has the applicant ever been found responsible for a disciplinary violation at your school, whether related to academic misconduct or behavioral misconduct, that resulted in the applicant's probation, suspension, removal, dismissal, or expulsion from your institution?  Yes  No

② To your knowledge, has the applicant ever been convicted of a misdemeanor, felony, or other crime?  Yes  No

If you answered yes to either or both questions, please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

**Check here if you would prefer to discuss this applicant over the phone with each admission office.**

**I recommend this student:**  No basis  With reservation  Fairly strongly  Strongly  Enthusiastically