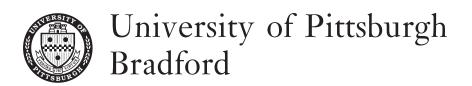
# **APPLICATION FOR ADMISSION**



Complete application package includes:

Send to: University of Pittsburgh at Bradford

**REQUIRED:** Application form, \$45 Application fee, H.S./College Transcripts,

SAT/ACT Scores.

**RECOMMENDED:** Guidance Counselor Recommendation, Personal Essay.

Office of Admissions 300 Campus Drive Bradford, PA 16701

<b>Information</b>	al	bout	you:
			_

Name:Last Name	First Middle
	Date of Birth:
Former Last Name(s) if any:	
•	
Permanent Address:	Number and Street
City or Town S	County:tate/ Country ZIP
	Cell:
Citizenship:   U.S.	
☐ U.S./dual	List other country:
☐ U.S. permanent resident visa	List country of citizenship:
☐ Other citizenship	List country:
Please select one (or more) race(s)/ethnicity(ies    American Indian/Alaskan Native    Native Hawaiian/Other Pacific Islander	s) from the following groups that you identify with: AsianAfrican American White
Information about your family:	
Mother/Spouse/Guardian	Father/Spouse/Guardian
Full Name:	Full Name:
Occupation:	Occupation:
If not with both parents, with whom do you make your po	ermanent home?
Have you previously applied to the University of Pitts	sburgh?  No Yes Term Year Year
When do you plan to enter Pitt-Bradford:	
Term: ☐ Fall ☐ Spring ☐ Summer	
Year: Expected date of gra	
Graduation occurs each yea  Will you be a:   Full-time (12+ credits)  Part	r in the months of December (12), April (04), and August (08)  -time (1-11 credits)   Freshman   Transfer
Do you desire University Housing? ☐ Yes ☐ No  If no, check one: ☐ Commute from parent's hor	

#### Please check the major you wish to pursue (please check one): **Bachelor Degrees:** \_\_ Accounting \_\_\_ English \_\_ Physical Sciences \_\_\_\_ Athletic Training \_\_\_\_ English Education 7-12 \_\_\_\_ Psychology \_\_\_\_ Biology \_\_\_\_ Entrepreneurship \_\_\_\_ Public Relations \_\_\_\_ Biology Education 7-12 Environmental Studies \_\_\_\_ Radiological Science \_\_\_\_ Broadcast Communications Environmental Studies Education 7-12 Social Sciences Business Education K-12 \_\_\_\_ Social Sciences Education 7-12 \_\_\_\_ Health and Physical Education K-12 \_\_\_\_ Business Management \_\_\_\_ Sociology \_\_\_\_ History/Political Science \_\_ Chemistry \_ Hospitality Management \_ Sport & Recreation Management \_\_\_ Chemistry Education 7-12 \_ Human Relations \_ Sports Medicine \_\_ Computer Info Syst & Tech \_ Undeclared \_\_ Interdisciplinary Arts \_\_ Criminal Justice \_\_ Mathematics (Applied) Writing \_\_ Economics \_\_ Mathematics Education 7-12 \_\_ Elementary Education \_ Nursing **Associate Degrees: Certifications:** \_\_\_\_ Engineering Science \_\_\_\_ Elementary Education \_\_ Information Systems \_\_ Secondary Education \_\_ Liberal Studies \_\_ Nursing \_\_\_ Petroleum Technology **Pre-Professional Programs:** \_\_\_\_ Pre-Chiropractic Pre-Health Information Management \_\_\_ Pre-Law Pre-Clinical Dietetics and Nutrition \_\_ Pre-Communication Science & Disorders Pre-Medicine \_\_ Pre-Dentistry \_\_\_\_ Pre-Occupational Therapy \_\_ Pre-Emergency Medicine \_\_\_\_ Pre-Optometry \_\_\_\_ Pre-Pharmacy\* Pre-Engineering\* \_ Chemical \_\_\_\_ Pre-Physical Therapy \_\_\_\_ Civil \_\_\_\_ Pre-Physician's Assistant \_\_\_\_ Computer \_\_\_\_ Pre-Podiatry \_\_\_\_ Electrical \_ Pre-Veterinary Medicine \_ Industrial \_ Mechanical \* These programs are completed at the Oakland Campus Please consider me for the Scholars Circle Honors Curriculum: Yes Please list, in chronological order, every high school, postgraduate school, college, or university you have attended: School Name City/State Dates Attended (from—to) School Name City/State Dates Attended (from—to) School Name Dates Attended (from—to) City/State FRESHMAN CANDIDATES ONLY Please list extracurricular/sports activities in which you have participated.

### TO BE COMPLETED BY ALL APPLICANTS

Residency Information:					
<b>Are your parents your legal guardians?</b> ☐ Yes ☐ No					
Do your parents/legal guardians claim you as a dependent on their federa	l income taxes? ☐ Yes ☐ No				
If yes: Are your parents/legal guardians residents of Pennsylvania?	☐ Yes ☐ No				
For how long? Years Months					
If no: Are you a resident of Pennsylvania?					
For how long? Years Months					
Have you attended a college or university within the last 12 months?					
Yes, in Pennsylvania Yes, outside Pennsylvania	No				
Have you been employed continuously for the last 12 months or longer?					
Yes, in Pennsylvania Yes, outside Pennsylvania	No				
Your answers to the questions in this section are optional, and will no application for admission.	ot be used in any way to evaluate your				
How did you first hear about Pitt-Bradford? (Check all that apply)					
	I met a representative at a college fair.				
	From the University's Web site.				
I found it in a college catalog.	From an alumnus/alumna.				
My guidance counselor told me about it.	Other				
Who had the most influence on your decision to apply? (Check all that ap	pply)				
Guidance Counselor	College Representative				
Parent	Other				
Friend	No one did				
Why did you decide to apply to Pitt-Bradford?					
What other colleges/universities, if any, are you also considering?					
PERSONAL ESSAY (Recommended)  You are not required to complete this part of the application. However, it is recommended by the Admission Committee that you take this opportunity to support your application. Please use a separate sheet of paper. Thank you.					

**SIGNATURE.** I understand this application will not be complete until I have submitted my final official high school transcript upon graduation (or my official satisfactory G.E.D. test result) and if I am a transfer applicant, all final post-secondary transcripts. I understand the University will prevent my registration and/or graduation from the University should these documents not be provided. All information I have provided is true and accurate to the best of my knowledge.

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

# **For Guidance Office Use Only:** Please fill out the following information. If possible, we would especially like you to include a recommendation for this student.

Student's Rank in Class/Size of Class	SAT Scores (highest for each)	AC T
Current overall GPA	M V	Composite
	Dates SAT taken	Date to be taken
High School Name/Address		CEEB Code
High School Phone Number	Counselor Name	Counselor Signature

COUNSELOR RECOMMENDATION ( Use separate page if necessary)

# ${\bf STUDENT\ RIGHT\text{-}TO\text{-}KNOW:\ GRADUATION\ RATE\ /\ CAMPUS\ SECURITY\ ACT\ DISCLOSURE}$

Statistical information concerning the graduation rate for the Bradford campus of the University of Pittsburgh, as required by the Student Right-to-Know and Campus Security Act, is available on request from the Enrollment Services Office, 300 Campus Drive, Bradford, PA 16701.

The University of Pittsburgh, as an educational institution and as an employer, does not discriminate on the basis of race, color, religion, ethnicity, national origin, age, sex, sexual orientation or marital, veteran, or handicapped status. This is a commitment made by the University, and is in accordance with federal, state and local laws and regulations. All relevant programs are administered by the Office of Affirmative Action, 901 William Pitt Union, Pittsburgh, PA 15260. Students should contact the Office of Affirmative Action in all cases where discrimination is alleged. For more information, call (412) 648-7860.