

*Tradition. Innovation. Excellence.*

**ST. JOSEPH'S COLLEGE**  
SJC BROOKLYN



# APPLICATION



*Undergraduate Application for  
Freshmen and Transfer Students*

# APPLICATION INSTRUCTIONS

## Dear Applicant:

Welcome to St. Joseph's College. Please refer to the check list to make certain that your application is complete.

### Freshmen

- Undergraduate application
- Official transcript from secondary school
- Official copy of your SAT I or ACT scores
- Guidance counselor recommendation
- Personal essay
- \$25 application fee

### Transfer Students

- Undergraduate application
- Official transcripts from all postsecondary schools
- SAT/ACT scores (if less than 24 credits)
- \$25 application fee
- If you have earned fewer than 24 college credits, you must also submit a high school transcript.

### Rolling Admission and Decision Notification

St. Joseph's College uses rolling admission, which means we accept and review applications on an ongoing basis. We begin reviewing applications in early December and decision letters are sent out throughout the year, beginning in mid-December.

### Preferred Application Deadlines

#### Fall

Freshman applicants.....March 1  
Transfer applicants.....June 1

#### Spring

Freshman applicants.....December 1  
Transfer applicants.....December 1

### Application Procedures

#### Application for Admission

Complete the form accurately and neatly to ensure that review of your application is not delayed.

#### Official Secondary School Transcript

Transcripts must be official copies with either a school seal or an original signature. Transcripts should be sent in a sealed envelope.

#### Official Copy of SAT I or ACT Scores

St. Joseph's College requires an official copy of your SAT or ACT scores. We prefer that your scores be sent to us directly from the testing center. Our **SAT code is 2802**, and our **ACT code is 2890**. St. Joseph's College also will accept test scores that are sent as part of your official high school transcript. St. Joseph's College will combine your highest test scores when reviewing your application.

#### Counselor Recommendation

A recommendation must be completed by your guidance counselor or your college adviser. We prefer that the counselor's recommendation be included with your application materials. However, if it is sent separately, it must be sent to St. Joseph's College directly by your guidance counselor.

#### Teacher Recommendation

Feel free to submit recommendations from multiple teachers, as this will strengthen your application. Teacher recommendations are preferred but not required.

#### Personal Essay

Personal statements help us become acquainted with you in ways different from courses, grades, test scores and other objective data. These statements enable you to demonstrate your ability to organize thoughts and express yourself. We are looking for an essay that will help us know you better as a person and a student. Please attach on a separate sheet. Choose topic A, B, C or D and respond in 250-500 words.

- A. Evaluate a significant experience or achievement that has special meaning to you.
- B. Discuss some issue of personal, local or national concern and its importance to you.
- C. Indicate a person who has had a significant influence on you, and describe that influence.
- D. Describe a character in fiction, a historical figure or a creative work (as in art, science, etc.) that has had an influence on you, and explain.

#### Application Fee

Please submit a check for \$25 with your application form. Make checks payable to St. Joseph's College. We will accept official fee waivers as well.

*Please return only the four-page application in the envelope provided.*

# APPLICATION FORM

**Personal Data** (Please type or print clearly and answer all applicable questions.)

Male  Female

Last name	First	Middle
Nickname	Maiden name	
Address	Apartment number	
City	State	ZIP
County	Country	
Phone (home)	(work)	(cell)
Email address		
Date of birth	Social Security number	- -

## Application Data

Have you previously applied to St. Joseph's College?  Yes  No If yes, when?  Fall\_\_\_\_\_(year)  Spring\_\_\_\_\_(year)

This application is for:  Fall 20\_\_\_\_  Spring 20\_\_\_\_  
 Full time  Part time

## Citizenship Data

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

Citizen of the United States?  Yes  No If no, country of citizenship\_\_\_\_\_

Permanent resident?  Yes  No Permanent resident (Alien reg. no.\_\_\_\_\_)

Student visa required?  Yes  No Please attach a copy of your alien registration card to the application.

Indicate visa currently held  F-1  J-1  M-1  Other (please explain)\_\_\_\_\_

Are you currently residing in the U.S.?  Yes  No

If yes, which visa do you currently hold? \_\_\_\_\_ Current visa expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

If you currently hold an F-1 visa, name of institution that issued your I-20:\_\_\_\_\_

Is English your native language?  Yes  No

If no, how many years have you lived in the U.S.?\_\_\_\_\_

Is any other language spoken at home?  Yes  No If yes, please specify:\_\_\_\_\_

I am interested in applying for the ACES program (a program for enhanced English language and culture):  Yes  No

## Programs of Study

Please indicate your proposed program of study:

### College of Arts and Sciences

- Accounting
- Adolescence (Secondary) Education:
  - Biology
  - Chemistry
  - English
  - History (Social Studies)
  - Mathematics
  - Spanish
- Biology
- Business Administration
- Chemistry
- Child Study
- Computer Information Technology
- Criminal Justice
- English

- History
- Hospitality and Tourism Management
- Human Relations
- Journalism and New Media Studies
- Marketing
- Mathematics
- Mathematics/Computer Science
- Medical Technology
- Nursing
- Political Science
- Psychology
- Recreation
- Social Sciences
- Sociology
- Spanish
- Speech (Communication Studies)

- Undecided

### Career Interest

- Elementary education
- Pre-law
- Pre-med
- Secondary education
- Special education
- Other
- I am interested in SJC's B.S./M.B.A. program in accounting.
- I would like to be considered for the SJC honors program.
- I am interested in the SJC/NY College of Podiatric Medicine joint degree program.

## SAT OR ACT

Results of the SAT, if known:	SAT date	Critical reading	Math	Writing
	SAT date	Critical reading	Math	Writing
	SAT date	Critical reading	Math	Writing
GPA after three years	ACT composite score			
Test of English as a Foreign Language (TOEFL) for international students score				

## For Freshman Applicants

Educational background:

High school	Location
Expected date of high school graduation	or receipt of GED
Other secondary school attended	Dates of attendance
Do you wish to transfer college credits taken while in high school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how many credits?	From which college?
College adviser	High school phone number

## Demographic Information (Optional)

The following items are optional. No information you provide will be used in a discriminatory manner.

- Are you Hispanic or Latino?  Yes, Hispanic or Latino (including Spain)  No
- Regardless of your answer to the previous question, please indicate how you identify yourself. (Check one or more.)
  - American Indian or Alaska Native (including all original peoples of the Americas)
  - 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)

## Student Housing

St. Joseph's College has a collaborative housing arrangement with Educational Housing Services. Contact the Office of Admissions at 718.940.5800 to receive more information and an application. To learn more about the housing program, visit our website at [sjcny.edu/brooklyn/admissions/housing](http://sjcny.edu/brooklyn/admissions/housing).

I am interested in applying for housing.  Yes  No

## Family Data

Father or guardian's name	Mother or guardian's name
College attended	College attended
Degree earned	Degree earned
Address	Address
City, state, ZIP	City, state, ZIP
Phone number	Phone number
Occupation	Occupation

## St. Joseph's Connections

Please list any members of your family who are alumni or current students of St. Joseph's College.

Name	Relationship	Class of
Name	Relationship	Class of
Name	Relationship	Class of

Are either of your parents or is your guardian a member of a uniformed services department?  Yes  No

If yes, which department? \_\_\_\_\_

Are you a veteran?  Yes  No

## Activities

List activities that you participated in at your high school and in your community.

(Feel free to attach additional sheets or activity résumé.)

School activities	Positions held	9th	10th	11th	12th
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Community activities	Positions held	9th	10th	11th	12th
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Special academic programs or awards	Dates
_____	
_____	
_____	
_____	

Work experience (position)	Employer	Hours/week	Dates
_____			
_____			
_____			
_____			

Other activities, leadership positions or awards
_____
_____
_____
_____

### Transfer Applicants Only

List in chronological order the names of all colleges, universities or professional schools attended; the dates of attendance; and the certificate or diploma received. Please note: any omission of an institution previously attended may have serious repercussions, including St. Joseph's College's refusal to accept credits from that institution.

1. College	from	to	Credits earned	State
2. College	from	to	Credits earned	State
3. College	from	to	Credits earned	State
Credits in progress			High school attended	
Approximate cumulative GPA				

Do you/will you have an associate degree?  Yes  No

If yes, type of degree? \_\_\_\_\_ Date granted \_\_\_\_\_

Have you ever been dismissed from a university/college or placed on academic or judicial probation?  Yes  No

If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please state your reason for seeking a transfer:  
\_\_\_\_\_  
\_\_\_\_\_

Transfer students must submit official transcripts from each college previously attended, along with college catalogs or course descriptions of all courses taken.

### All Applicants

**Please complete this survey.**

1. Who influenced you to apply to St. Joseph's College?

- SJC student  SJC alumni  SJC counselor  
 High school guidance counselor  Relative  Other \_\_\_\_\_

2. Please check all events where you met a St. Joseph's College representative:

- College fair  Group presentation  College night  
 Campus tour  Meeting with professor or dean  Website  
 Local reception  Open house  Personal interview  
 Conversation with current student  High school visit by a St. Joseph's College representative  
 Other \_\_\_\_\_

3. In comparison to other viewbooks I have seen, I would rate SJC's viewbook as:

- The best I've seen  Very good  Good  
 Fair  Not applicable

4. In comparison to other websites I have seen, I would rate SJC's website as:

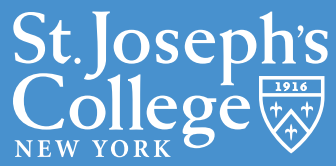
- The best I've seen  Very good  Good  
 Fair  Not applicable

**All students:** I certify that the information I have provided on this application is accurate and complete to the best of my knowledge. I understand that this application must be complete and all requested credentials forwarded before any consideration can be given by the Office of Admissions. I further understand that any willful or knowing misrepresentation or omission of any information requested constitutes grounds for nonadmission or dismissal at any time after admission.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

It is the policy of St. Joseph's College not to discriminate on the basis of race, color, religion, sex, national or racial origin, age, handicap or marital status in its educational programs, admissions policies, employment policies, financial aid or other school-administered programs. This policy is implemented in compliance with all applicable federal, state and local statutes or regulations.





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