Amherst College Visiting Student Application

PERSONAL DATA

Legal name: 

Prefer to be called: ______________________________ (nickname) 

Former last name(s) if any: ______________________________ 

Permanent home address: 

City or Town: __________________________ State: __________ Country: __________ Zip Code + 4 or Postal Code: 

If different from the above, please give your mailing address for all admission correspondence: 

Mailing address: (use from _____ to _____) ____________________________ 

City or Town: __________________________ State: __________ Country: __________ Zip Code + 4 or Postal Code: 

Phone at mailing address: (______) ________________________ Permanent home phone: (______) ________________________ 

E-mail address: ________________________________ 


□ U.S. Permanent Resident visa. Citizen of __________________________. □ Other citizenship: __________ / __________ 

Alien Registration Number: ________________________________ 

If you are not a U.S. citizen and live in the United States, how long have you been in the country? __________________________ 

Possible area(s) of academic concentration/major: __________________________ or undecided □ 

Possible career or professional plans: __________________________ or undecided □ 

Have you ever been dismissed, suspended or incurred serious disciplinary action at any school you’ve attended? □ Yes □ No. Have you ever been arrested for anything other than a traffic violation? □ Yes □ No. If yes to either or both, please send a detailed explanation with your application. 

Have you applied to Amherst College before? □ Yes □ No. If yes, when? __________________________ 

The following items are optional: Social Security number, if any: _______ _______ _______ - _______ _______ - _______ _______ _______ _______ 

Place of birth: __________________________ City: __________ State: __________ Country: __________ 

First language, if other than English: __________________________ Language spoken at home: __________________________ 

1. Are you Hispanic or Latino (including Spain)? □ Yes □ No (country __________________________) 

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

□ African American, Black (country __________________________) 

□ Asian American (country of family’s origin __________________________) 

□ American Indian, Alaskan Native (tribal enrollment number __________________________) 

□ Native Hawaiian, Pacific Islander (country __________________________) 

□ White or Caucasian (country __________________________) 

□ Other (Specify __________________________) 

2009-10
EDUCATIONAL DATA

College you now attend: ____________________________________________ Date of entry: __________________________

Address: ______________________________________________________

City or Town State Country Zip Code + 4 or Postal Code

College code: __________________________


Faculty advisor: Name: ____________________________________________

Advisor’s phone: (__________) ________________________________ Advisor’s FAX: (__________) __________________

Area Code Number Ext. Area Code Number

List all other colleges at which you have taken courses for credit and list names of courses taken and grades earned on a separate sheet. Please have an official transcript sent from each institution as soon as possible.

Name of College Location (City, State, Zip) Degree Candidate? Dates Attended

_______________________________________________________________________________________________________________________

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_______________________________________________________________________________________________________________________

TEST INFORMATION (optional, but recommended). If you’ve taken any of the following tests, we recommend you complete this section and have official results sent to us.

ACT

<table>
<thead>
<tr>
<th>Date Taken/To Be Taken</th>
<th>English Score</th>
<th>Math Score</th>
<th>Reading Score</th>
<th>Science Score</th>
<th>Composite Score</th>
<th>Combination English/Writing</th>
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SAT

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<th>Date Taken/To Be Taken</th>
<th>Verbal/Critical Reading Score</th>
<th>Math Score</th>
<th>Writing Score</th>
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</table>

SAT Subject Tests

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<thead>
<tr>
<th>Date</th>
<th>Subject</th>
<th>Score</th>
<th>Date</th>
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Test of English as a Foreign Language (TOEFL)

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<th>Date Taken/To Be Taken</th>
<th>Score</th>
<th>Date</th>
<th>Score</th>
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</table>

FAMILY

Mother’s full name: ____________________________________________

Is she living? ________________________________________________

Home address if different from yours:

_________________________________________________________

_________________________________________________________

Occupation: ________________________________________________ (Describe briefly)

Name of business or organization: _____________________________

College (if any): ____________________________________________

Degree: ___________________ Year: ____________________________

Professional or graduate school (if any): ______________________

Degree: ___________________ Year: ____________________________

If not with both parents, with whom do you make your permanent home? __________________________________________________________

Please check if parents are □ married □ separated □ divorced (date__________ ) other __________________________

Please give names and ages of your brothers or sisters. If they have attended college, give the names of the institutions attended, degrees, and approximate dates: ______________________________________________________________________________________________________

_______________________________________________________________________________________________________________________

_______________________________________________________________________________________________________________________
**ACADEMIC HONORS**
Briefly describe any scholastic distinctions or honors you have won beginning with ninth grade:

_______________________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________

**EXTRACURRICULAR, PERSONAL, AND VOLUNTEER ACTIVITIES (including summer)**
Please list your principal extracurricular, community, and family activities and hobbies in the order of their interest to you. Include specific events and/or major accomplishments such as musical instrument played, varsity letters earned, etc. Check (✓) in the right column those activities you hope to pursue in college. To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Grade level or post-secondary (p.s.)</th>
<th>Approximate time spent</th>
<th>Positions held, honors won, or letters earned</th>
<th>Do you plan to participate in college?</th>
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<tbody>
<tr>
<td></td>
<td>9 10 11 12 PS Hours per week Weeks per year</td>
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</table>

**WORK EXPERIENCE**
List any job (including summer employment) you have held during the past three years.

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<thead>
<tr>
<th>Specific nature of work</th>
<th>Employer</th>
<th>Approximate dates of employment</th>
<th>Approximate no. of hours spent per week</th>
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In the space provided below, or on a separate sheet if necessary, please describe which of these activities (extracurricular and personal activities or work experience) has had the most meaning for you, and why.

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PERSONAL STATEMENT

This personal statement helps us become acquainted with you in ways different from courses, grades, test scores, and other objective data. It will demonstrate your ability to organize thoughts and express yourself. We are looking for responses that will help us know you better as a person and as a student.

Discuss briefly why you wish to spend a semester at Amherst. Be specific about how it will further your educational goals.

My signature below indicates that all information in my application is complete, factually correct, and honestly presented.

Signature ___________________________ Date ____________________

Amherst College is committed to administer all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, sexual orientation, disability, veteran status or sex. The college complies with federal and state legislation and regulations regarding non-discrimination.
# College Report

## TO THE APPLICANT:
After filling in the information below, give this form to your registrar. Please remember to have your secondary school send an official transcript as well. A transcript that arrives without this form attached will be considered incomplete.

Student name: __________________________________________________________________________________________________________

Last/Family First Middle (complete) Jr., etc.

Address: ______________________________________________________________________________________________________________

Number and Street City or Town State Country Zip Code + 4 or Postal Code

Current year courses—please indicate title, level and credit value of all courses you are taking this year.

<table>
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<tr>
<th>First Semester/Quarter:</th>
<th>Second Semester/Quarter:</th>
<th>Third Quarter:</th>
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## TO THE COLLEGE REGISTRAR:
Attach applicant’s official transcript, including courses in progress, a school profile, and transcript legend. Also attach secondary school transcript if available. (Please check transcript copies for readability.) After filling in the blanks below, use both sides of this form to describe the applicant. Please provide all available information for this candidate:

Is the applicant in good academic standing and eligible to continue at the institution in which she or he was most recently enrolled? If no, please explain below.

☐ yes ☐ no

In college, has the applicant ever been on academic probation? If yes, please explain below.

☐ yes ☐ no

In college, has the applicant ever been on personal probation? If yes, please explain below.

☐ yes ☐ no

Registrar’s name (please print or type): ________________________________________

Position: _____________________________ College: _____________________________

Registrar’s address: _____________________________ Date: _____________________________

Registrar’s phone: (__________) ___________ Registrar’s FAX: (__________) ___________

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<tr>
<th>Area Code</th>
<th>Number</th>
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College Code: ___ ___ ___ ___ ___ ___ Registrar’s e-mail: _____________________________

Please mail to:
Office of Admission
Amherst College
PO Box 5000
Amherst, MA 01002-5000
Faculty Evaluation I

TO THE APPLICANT: Fill in the information below and give this form and a stamped envelope, addressed to Amherst, to a faculty member who has taught you an academic subject.

Social Security No.____________________

Student name:  __________________________________________________________________________________________________________

Last/Family First Middle (complete)                Jr., etc.

Address:  _______________________________________________________________________________________________________________

Number and Street                                                        City or Town                                State                        Country                   Zip Code + 4 or Postal Code

School you now attend:_______________________________________________________  CEEB/ACT code:  _____________________________

Please return a photocopy of this sheet to the appropriate admissions office(s) in the envelope(s) provided you by this student.

Professor’s Name (please print or type):   ______________________________________________  Position:   _____________________________

College:  _______________________________________________________________________________________________________________

College Address:   ________________________________________________________________________________________________________

Professor’s Phone: (____________)___________________________________ Professor’s e-mail:  ______________________________________

TO THE PROFESSOR:

Amherst College finds candid evaluations helpful in choosing from among highly qualified candidates. We are primarily interested in whatever you think is important about the applicant’s academic and personal qualifications for college. Please submit your references promptly. A photocopy of this reference form, or another reference you may have prepared on behalf of this student is acceptable. You are encouraged to keep the original of this form in your private files for use should the student need additional recommendations. We are grateful for your assistance.

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. Colleges do not provide access to admissions 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, sexual orientation, disability, veteran status or sex. The college complies with federal and state legislation and regulations regarding non-discrimination.

Please return a photocopy of this sheet to the appropriate admissions office(s) in the envelope(s) provided you by this student.

Professor’s Name (please print or type):   ______________________________________________  Position:   _____________________________

College:  _______________________________________________________________________________________________________________

College Address:   ________________________________________________________________________________________________________

Professor’s Phone: (____________)___________________________________ Professor’s e-mail:  ______________________________________

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 and the level of course difficulty.

_____________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________

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(continued)
EVALUATION

Please feel free to write whatever you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the candidate’s intellectual promise, motivation, relative maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, and enthusiasm. We welcome information that will help us to differentiate this student from others.

RATINGS

Compared to other students you are teaching, how do you rate this student in terms of:

<table>
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<tr>
<th>No basis</th>
<th>Below Average</th>
<th>Average</th>
<th>Good (above average)</th>
<th>Very Good (well above average)</th>
<th>Excellent (top 10%)</th>
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Signature ____________________________ Date ____________________________
Faculty Evaluation II

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Social Security No.____________________

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Number and Street                                                        City or Town                                State                        Country                   Zip Code + 4 or Postal Code

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College: __________________________________________________________________________

College Address: ______________________________________________________________________

Professor’s Phone: (____________)___________________________________  Professor’s e-mail: ______________________________________

Area Code Number                            Ext.

BACKGROUND INFORMATION

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Signature _______________________________________________________________________  Date _______________________________