

UNDERGRADUATE
application



MEDAILLE COLLEGE

Admissions Office
Medaille College
18 Agassiz Circle
Buffalo, NY 14214
(716) 880-2200
(800) 292-1582
www.medaille.edu

Applying to Medaille College

- Apply online at www.medaille.edu and the application is free!
- Paper applications are available, but must be submitted with a \$25 check or money order payable to Medaille College to:

Admissions Office, Medaille College
18 Agassiz Circle, Buffalo, NY 14214

- Ask your guidance office to send Medaille College an official high school transcript. Please include your senior year courses, including your SAT and/or ACT scores.
- Submit scores from either the College Board or ACT if your guidance office does not have your test results.
- If you have attended any college or university since leaving high school, have the registrar at each of those colleges send Medaille College an official transcript.

application

Applying for the: **FALL OF 20** _____
 or **SPRING OF 20** _____

I am applying for Admissions as a:

- TRADITIONAL FRESHMAN** [a recent/soon to be HS graduate, who has not taken college level courses since their high school graduation]
- TRANSFER STUDENT** [a student who has taken any college level course since completing their high school education]

PERSONAL INFORMATION (please print)

SOCIAL SECURITY NUMBER: _____ - _____ - _____

FIRST MIDDLE LAST NICKNAME/PREFERRED NAME

STREET

CITY STATE ZIP CODE
 ()

TELEPHONE EMAIL

SEX: Male Female DATE OF BIRTH: MONTH/DAY/YEAR

Are you a US citizen? Yes. Skip the next 3 questions.
 No. Complete the next 3 questions.

Do you hold permanent residency status in the US? Yes No

What is your country of citizenship? _____

What is your country of birth? _____

Have you applied previously to Medaille College? Yes No

If yes, when _____

Is English your native language? Yes No

If no, my native language is _____

- RACE:** (optional)
- Black, Non-Hispanic
 - White, Non-Hispanic
 - Hispanic
 - Bi-Racial
 - American/Alaskan Indian
 - Asian/Pacific
 - Other
 - Do not wish to disclose

EDUCATION INFORMATION List all High Schools and Colleges you have attended

from to

HIGH SCHOOL CITY STATE DATES ATTENDED (MONTH/YEAR)

COLLEGE CITY STATE DATES ATTENDED (MONTH/YEAR)

COLLEGE CITY STATE DATES ATTENDED (MONTH/YEAR)

COLLEGE CITY STATE DATES ATTENDED (MONTH/YEAR)

EDUCATION INFORMATION continued

- Have you taken the SAT? Yes No
- Have you taken the ACT? Yes No
- Do you plan on taking either test in the future? Yes No If yes, when _____
- Are you interested in living on campus? Yes No
- Are you interested in the Army ROTC program? Yes No

List other colleges to which you are applying: _____

NAME OF COLLEGE	CITY	STATE

YOUR ACADEMIC INTERESTS Your probable choice of major (check one):

- | | | |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Secondary (7-12)* | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Biology | <input type="checkbox"/> Bachelor of Arts |
| <input type="checkbox"/> Pre Med <input type="checkbox"/> Pre Vet | <input type="checkbox"/> Math | <input type="checkbox"/> Bachelor of Science |
| <input type="checkbox"/> Secondary Biology Teacher* | <input type="checkbox"/> English | <input type="checkbox"/> Sports Management |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Creative Writing <input type="checkbox"/> Literature | <input type="checkbox"/> Veterinary Technology |
| <input type="checkbox"/> Marketing <input type="checkbox"/> Management | <input type="checkbox"/> Professional Writing | <input type="checkbox"/> Clinical Practice <input type="checkbox"/> Research |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Secondary English Teacher | <input type="checkbox"/> Regulatory Medicine |
| <input type="checkbox"/> Computer Information Systems | <input type="checkbox"/> Liberal Studies | <input type="checkbox"/> Visual and Digital Arts |
| <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Media/Communications | <input type="checkbox"/> Graphic Design <input type="checkbox"/> Studio Art |
| <input type="checkbox"/> Education | <input type="checkbox"/> TV/Radio Broadcasting | <input type="checkbox"/> Undeclared |
| <input type="checkbox"/> Childhood (1-6) <input type="checkbox"/> Middle (5-9) | <input type="checkbox"/> Journalism | |
| <input type="checkbox"/> Special Education Certification* | <input type="checkbox"/> Advertising/Public Relations | |
| | <input type="checkbox"/> Media Studies | |

**Pending New York State Education Department Approval*

EXTRACURRICULAR AND ATHLETIC INTERESTS Check all those that interest you.

ACADEMIC

- Art & Photography
- Helping Hands Club
- Life Sciences Club
- Philosophy Club
- Sports Management Assist Team
- Vet Tech Club
- Society for Human Resource Management (SHRM)
- Perspective
- Prelude
- WMCB The Lizzard

CULTURAL

- Multicultural Club
- Hip Hop Kulture Club

RECREATIONAL

- Cheerleading
- Fencing Club
- Hockey Club
- Outdoor Adventure Club
- Student Athlete Advisory Committee (SAAC)

SOCIAL SERVICE

- Resident Student Council (RSC)
- Medaille Performers (Drama & Singing)
- Students for a Better Community
- Student Activities Board
- Student Government Association

NCAA ATHLETICS:

- Basketball
- Baseball
- Bowling (women only)
- Cross Country
- Golf
- Lacrosse
- Softball
- Soccer
- Volleyball

Please list and describe any personal interest and/or activities that were not included in the sections above:

FAMILY INFORMATION (please print)

NAME OF FATHER/STEPFATHER/MALE GUARDIAN:

FIRST MIDDLE LAST

STREET CITY STATE ZIP

HOME TELEPHONE OCCUPATION EMPLOYER

BUSINESS ADDRESS

CITY STATE ZIP BUSINESS PHONE

Would he prefer to be contacted via email? Yes No Email _____

Has he ever attended a 2 year or 4 year college/university? Yes No

NAME OF MOTHER/STEPMOTHER/FEMALE GUARDIAN:

FIRST MIDDLE LAST

STREET CITY STATE ZIP

HOME TELEPHONE OCCUPATION EMPLOYER

BUSINESS ADDRESS

CITY STATE ZIP BUSINESS PHONE

Would she prefer to be contacted via email? Yes No Email _____

Has she ever attended a 2 year or 4 year college/university? Yes No

RELATIVE(S) who have attended or are now attending Medaille College:

- Father
- Brother
- Grandfather
- Uncle
- Cousin
- Other: _____
- Mother
- Sister
- Grandmother
- Aunt

CONCLUSION Please read carefully and sign.

Have you been convicted of a crime (felony or misdemeanor) in any state or country, the disposition of which was other than by acquittal or dismissal?

Yes, please explain with a separate sheet of paper

No

I certify that the information on this form is both complete and accurate. I understand that falsifying any part of the application may result in my being refused admission or being required to withdraw from the college.

SIGNATURE

DATE



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