College Application Checklist—Online Applications

THIS CHECKLIST MUST BE ATTACHED TO THE FRONT OF EVERY 8.5 x 11” COLLEGE APPLICATION MANILLA ENVELOPE THAT WILL BE ADDRESSED TO THE COLLEGE’S UNDERGRADUATE ADMISSION OFFICE. YOU CAN USE THIS CHECKLIST AS A REMINDER OF WHAT IS DUE. YOU CAN MODIFY THIS FORM TO SUIT YOUR INDIVIDUAL NEEDS SUCH AS SPECIAL TALENT, AUDITION OR PORTFOLIO REQUIREMENTS. N.B. INCOMPLETE APPLICATION PACKETS WILL NOT BE ACCEPTED BY THE COLLEGE OFFICE. ALL REQUIRED MATERIAL MUST BE PRESENT!

Name of College or University:
City:    State:   Are you using the Common Application?_____

Major (or undecided):
Division (College of Arts & Sciences, etc.):

Deadline for application:

I have completed and sent my online application on the following date:__________

I have applied via the following admission option (Rolling, Regular Decision, Early Decision I, Early Decision II, Early Action, Restrictive/Single Choice Early Action):__________________

I HAVE INCLUDED THE FOLLOWING ITEMS IN THE ENVELOPE (please check)

Activity Résumé _______
Essay (s) _______
Portfolio/DVD/CD_______
Payment (check, money order, credit card) _______

I HAVE FORWARDED MY STANDARDIZED TESTS TO THE COLLEGE VIA www.collegeboard.com and/or www.actstudent.org (please check)

SAT Reasoning Test, Date Sent____________
SAT Subject Tests, Date Sent____________
ACT, Date Sent _______
Or, are you applying via a “Test Optional” program?  Yes or No (please circle)
ADDITIONAL INFORMATION

Recommendation Letters
- Are recommendation letters required? Yes or No (please circle)
- How many recommendation letters are required? ______
- Which teachers have you asked to write letters of recommendation for you?

- Are Teacher Evaluation forms required? Yes or No (please circle). If Yes, have you submitted the Teacher Evaluation form to your teachers to complete? Yes or No (please circle).
- Is a counselor recommendation required? Yes or No (please circle). If so, have you included a Secondary School report in this envelope? Yes or No (please circle).
- N.B. All Teacher Evaluation and Secondary School Report forms must be partially completed by the student (top half)!

Student Signature___________________ Date_________________

Applicant’s Waiver of Right to Access to Confidential Information

I hereby freely and voluntarily waive my right of access to any information contained within my recommendation letters. I agree that my letters of recommendation shall remain confidential.

Student Signature_____________________ Date_________________

Under the provisions of the Family Educational Rights Act of 1974, the student named above has the right to review his/her educational records. The student may waive his/her rights to access of letters of recommendation by signing the statement above.

For College Center Use Only:

Date submitted to the College Center _____________________________
Signature________________________________________________________

Date application mailed by the College Center_______________________
Signature________________________________________________________