

BARNARD

Office of Pre-College Programs, Barnard College, Columbia University, 3009 Broadway, New York, NY 10027-6598.
(212) 854-8866. Fax: 212/854-8867. E-mail address: pcp@barnard.edu
<http://www.barnard.edu/pcp>

Application for Admission to Barnard's Summer in New York City: A Pre-College Program

To the Applicant:

Your application to the Pre-College Program consists of five parts:

1. Student application form to be completed by you, signed by a parent or guardian, and returned with the application fee. For applicants living in the U.S., a \$40 non-refundable application fee payable by a credit card, check or money order made out to *Barnard College*. For those outside the U.S., a \$65 non-refundable application fee payable by credit card only. Applications will be accepted after May 1 on a space-available basis.
2. One recommendation form to be completed by a teacher familiar with your school work.
3. One recommendation form to be completed by your guidance counselor or principal.
4. An official high school transcript in English to be sent to Barnard directly by your school.
5. A 250-500 word essay. See "Personal Statements" on the next page.

All materials should be sent to the Office of Pre-College Programs at the address above. An online application is also available on our website. To verify that your application is complete, contact the Office of Pre-College Programs.

STUDENT INFORMATION ▼	Name				
	Last		First	Middle	Sex
	Permanent address				
	Street		City	State	Zip Code
	Mailing address (if different from above)				
	Street		City	State	Zip Code
	Session: <input type="checkbox"/> Four-week session <input type="checkbox"/> One-week session <input type="checkbox"/> Leadership Institute		Type of admission requested: <input type="checkbox"/> Residential <input type="checkbox"/> Commuter		
	Home telephone number ()		E-mail address		
	Date of birth	mo.	day	yr.	Place of birth
	Citizenship or Visa Status				
High School					
Name		Year of Graduation			
Address					
Street		City	State	Zip Code	
High school telephone number ()		Type of School: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Parochial <input type="checkbox"/> Home School			

PARENT INFO ▼	Father's Name		Mother's Name		
	Occupation		Occupation		
	Person responsible for tuition charges				
	Name			Phone number	
Address					
Street		City	State	Zip Code	

Course Selection: Each four-week student enrolls in two courses: a morning and an afternoon course. One-week students enroll in one morning course. *Leadership Institute applicants leave this blank.* Course descriptions are in the brochure. Indicate your course selections below, including your second and third choices in case your first choice is closed. The Pre-College Programs Office assigns students to classes when students' deposits are received.

Morning Course	Afternoon Course (one-week applicants leave blank)
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____

Leadership Institute applicants only explain why you want to attend.

Personal Statement: On a separate sheet attached to this application, please write one well-developed 250-500 word essay on **one** of the following:

1. Discuss a person other than an immediate family member who has had a significant influence on you. **Or:**
2. Name an important goal you have set and explain how you have achieved it. **Or:**
3. Name a city you have visited and the impact it had on you. **Or:**
4. Discuss a political issue of importance to you.

Describe your activities during the past several summers. (e.g., jobs, travel, etc.)

Please give the name, year of graduation, and relationship of any relatives who attended or are now attending Barnard College.

How did you first find out about Barnard's Summer in New York City Program? (Please be specific.)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Peterson's Summer Guide | <input type="checkbox"/> Received Flyer in the Mail | <input type="checkbox"/> Barnard Alumnae | <input type="checkbox"/> New York Times |
| <input type="checkbox"/> High School Guidance Counselor | <input type="checkbox"/> Pre-College Program Alumni | <input type="checkbox"/> Received an e-mail | |
| <input type="checkbox"/> Web Search (please specify) _____ | <input type="checkbox"/> Duke TIP/EOG | <input type="checkbox"/> Other (please specify) _____ | |

Optional: If you are a United States citizen, which of the following do you consider yourself? Please check all that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> African American, Black | <input type="checkbox"/> Caucasian, not of Hispanic origin | <input type="checkbox"/> Puerto Rican |
| <input type="checkbox"/> American Indian or Alaskan native* | <input type="checkbox"/> Hispanic, Latino | <input type="checkbox"/> Other* |
| <input type="checkbox"/> Asian or Pacific Islander* | <input type="checkbox"/> Mexican American (Chicano/a) | <input type="checkbox"/> * Please specify: _____ |

If paying the application fee by credit card, please provide the following information:

Name of person as it appears on card _____

Amount paid _____ Type of card MasterCard Visa _____

Account no. _____ Expiration date _____

Signature of card holder _____

Signature of Applicant _____ Date _____

Signature of Parent or Legal Guardian (if other than parent) _____ Date _____

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Principal/Guidance Counselor Recommendation Form

To the Applicant

Please complete the information in this section and submit the form to your high school counselor or principal.

Applicant's Name _____

Permanent Address _____

Session: Four-week session One-week session Leadership Institute

Type of admission requested: Residential Commuter

Name of Individual Completing Recommendation _____

Family Educational Rights and Privacy Act of 1974. Under the provision of this Act, you and your parents or guardians have the right, if you enroll in the Pre-College Program at Barnard, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please sign below if you agree to waive your right of access to this recommendation form. You may be assured that your decision will not affect action on your application.

Applicant's Signature _____

Date _____

Signature of Parent or Legal Guardian (if other than parent) _____

Date _____

To the Counselor or Principal

The student whose name appears above is applying for admission to Barnard's Summer in New York City: A Pre-College Program. Your candid assessment of the applicant's academic performance, intellectual promise, and qualities as a person will help us in making final selections for admission. Please complete this form and return it as soon as possible to the above address.

Please attach a school profile and a complete transcript, including courses in progress, for the applicant.

What is your relationship to the applicant? Guidance Counselor Principal Other (please specify) _____

1. List secondary schools attended:

2. Number of absences for the 2008-2009 school year, to date. If absences are excessive, please give reasons.

3. If the applicant has ever been placed on probation, suspended, or dismissed, or if he or she has left school voluntarily for any length of time, please explain.

4. The applicant's overall curriculum is: Average Less Than Demanding Demanding Very Demanding Most Demanding

5. The applicant's cumulative average is _____ on a scale of _____. Is the average Weighted? Unweighted?

6. Would you rank this student in the top 5% top 10% top 25% top 50% bottom 50% of his/her class? (Please check one.)

7. Please assess the candidate's personal qualities and academic abilities. We are particularly interested in your comments about his or her character, relative maturity, independence, values, and any special talent or quality that he or she possesses. We would like to know about both strengths and weaknesses. (Feel free to attach an additional sheet.)

8. I recommend this student for admission to Barnard's Pre-College Program:

	not recommended	without enthusiasm	fairly strongly	strongly	enthusiastically
for academic promise:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
for character and personal promise:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
overall:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature _____

Date _____

Please print name _____

Title _____

Phone number _____

Please return the completed form to the Office of Pre-College Programs,
Barnard College, Columbia University, 3009 Broadway, New York, NY 10027-6598. Fax: 212/854-8867.

Thank you.

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Teacher Recommendation Form

To the Applicant

Please complete the information in this section and submit the form to a high school teacher.

Applicant's Name _____

Permanent Address _____

Session: Four-week session One-week session Leadership Institute Type of admission requested: Residential Commuter

Name of Individual Completing Recommendation _____

Family Educational Rights and Privacy Act of 1974. Under the provision of this Act, you and your parents or guardians have the right, if you enroll in the Pre-College Program at Barnard, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please sign below if you agree to waive your right of access to this recommendation form. You may be assured that your decision will not affect action on your application.

Applicant's Signature _____

Date _____

Signature of Parent or Legal Guardian (if other than parent) _____

Date _____

To the Teacher

The student whose name appears above is applying for admission to Barnard's Summer in New York City: A Pre-College Program. Your candid assessment of the applicant's academic performance, intellectual promise, and qualities as a person will help us in making final selections for admission. Please complete this form and return it as soon as possible to the above address.

1. List the course(s) you have taught the student: _____

2. What grade did the applicant receive in your course(s)? _____

3. How long have you known the applicant? _____

4. Would you rank this student in the top 5% top 10% top 25% top 50% bottom 50% of his/her class? (Please check one.)

5. Compared to other students in his or her class, how do you rate this student in terms of:

	No basis	Below Average	Average	Good (above average)	Very Good (Well above average)	Excellent (top 10%)	Outstanding (top 5%)
Academic achievement							
Intellectual promise							
Quality of writing							
Disciplined work habits							
Maturity							
Motivation							
Integrity							
Overall							

6. Barnard's Pre-College Program seeks students who will thrive in an academically challenging program. Please describe in as much detail as possible the candidate's academic ability and which skills in particular will help him or her meet the demands of an academically rigorous program. (Feel free to attach an additional sheet.)

7. Please assess the candidate's personal qualities. We are interested in your comments about his/her character, relative maturity and any special talents she or he possesses. We would like to know both the strengths and weakness of the applicant. (Feel free to attach an additional sheet.)

Signature

Date

Please Print Name

Title

Phone Number:

School Name

Please return the completed form to the Office of Pre-College Programs Barnard College, Columbia University, 3009 Broadway, New York, NY 10027-6598. Fax: 212/854-8867.

Thank you.