

# INSTRUCTIONS

## *How to apply to College of St. Joseph*

To begin the application process for admission to College of St. Joseph, fill out this application form and then submit along with required supplemental materials.

If you have questions during your application process, contact

### **College of St. Joseph Admissions Office**

Phone: (802) 776-5205

Fax: (802) 776-5310

Email: [admissions@csj.edu](mailto:admissions@csj.edu)

**CSJ FAFSA Code: 003685**

**CSJ SAT Code: 3297**

**CSJ ACT Code: 4230**

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## APPLICATION CHECKLIST

- Complete an undergraduate application.
- Submit an essay (250 word minimum).
- Submit all official high school and college transcripts.
- Submit one sealed letter of academic recommendation.

## ADDITIONAL REQUIREMENTS FOR INTERNATIONAL STUDENTS

- One letter of recommendation from an English teacher.
- TOEFL, ELS or IELTS scores.
- Financial verification.
- Officially translated transcripts.

*Immunization records must be submitted by all students prior to attending class.*

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip Code

Email: \_\_\_\_\_

Home Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Place of Birth: \_\_\_\_\_  
City State Country

Gender:  Male  Female

Are you a citizen of the United States:  Yes  No If no, are you a permanent resident holding a Green Card:  Yes  No

Country of citizenship if other than the United States: \_\_\_\_\_

Is English your first language?  Yes  No If no, what is your first language? \_\_\_\_\_

Ethnic Background (optional):  Hispanic or Latino  Black or African American  American Indian or Alaska Native  
 Native Hawaiian or Pacific Islander  Asian  White  Other

## ENROLLMENT INFORMATION

Enrollment Year: \_\_\_\_\_ Entry Term:  Fall  Spring // Entrance Status:  First Time/First Year  Transfer

Enrollment Status:  Full-time  Part-time // Have you previously been enrolled at College of St. Joseph?  Yes  No

Were you referred to College of St. Joseph by an alum?  Yes  No Name: \_\_\_\_\_ Year of graduation: \_\_\_\_\_

How did you hear about CSJ? \_\_\_\_\_

Do you intend to apply for on-campus housing?  Yes  No // Do you intend to apply for financial aid?  Yes  No

Do you intend to apply to the STEPS program? (Designed to help Vermont youth transition from foster care to college.)  Yes  No

## FAMILY INFORMATION

Do you have any relatives who have attended College of St. Joseph?  Yes  No

If yes, indicate name, relationship and year: \_\_\_\_\_

Parent 1:  Mother  Father  Guardian Full Name: \_\_\_\_\_

Mailing Address, if different from yours: \_\_\_\_\_  
Street City State Zip Code

Primary Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Level of Education: \_\_\_\_\_

Parent 2:  Mother  Father  Guardian Full Name: \_\_\_\_\_

Mailing Address, if different from yours: \_\_\_\_\_  
Street City State Zip Code

Primary Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Level of Education: \_\_\_\_\_

## EDUCATIONAL BACKGROUND

Please list all high schools that you have attended starting with the most recent.

You must request all transcripts from these schools be sent to the College of St. Joseph Admissions Office.

Name of School	City	State	Dates of Attendance	Graduation Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

High school guidance counselor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Have you taken the SAT or ACT college entrance examination?  Yes  No Date: \_\_\_\_\_

Describe any academic distinctions or honors that you have received: \_\_\_\_\_

List any extra-curricular activities that you have been involved in: \_\_\_\_\_

Have you ever been suspended, expelled, or dismissed from any institution?  Yes  No

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

Have you ever been convicted of a felony?  Yes  No

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

## TRANSFER STUDENTS

Please list all colleges or universities that you have attended starting with the most recent.

You must request all transcripts from these institutions be sent to the College of St. Joseph Admissions Office.

Name of Institution	City	State	Dates of Attendance	Graduation Date	Degree
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## ACADEMIC AREA OF STUDY

### Associates Degrees:

- |  |   |   |                                    |
|--|---|---|------------------------------------|
| <input type="checkbox"/> Accounting              | <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Human Services           | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Liberal Studies  | <input type="checkbox"/> Medical Coding & Billing | (Associates or Bachelor's)         |

### Bachelor's Degrees:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accounting               | <input type="checkbox"/> Golf Course Management       | <input type="checkbox"/> Radiologic Sciences                    |
| <input type="checkbox"/> Business Administration  | <input type="checkbox"/> Health Science               | <input type="checkbox"/> Sonography                             |
| <input type="checkbox"/> Criminal Justice         | <input type="checkbox"/> Pre PA                       | <input type="checkbox"/> Radiography                            |
| <input type="checkbox"/> Educational Studies      | <input type="checkbox"/> Pre PT                       | <input type="checkbox"/> Radiography Management (Transfer only) |
| <input type="checkbox"/> Secondary Social Studies | <input type="checkbox"/> Strength & Conditioning      | <input type="checkbox"/> Sports Management                      |
| <input type="checkbox"/> Secondary English        | <input type="checkbox"/> 3+1 Pre-Chiropractic         | <input type="checkbox"/> Human Services with concentration in   |
| <input type="checkbox"/> Elementary Education     | <input type="checkbox"/> History                      | <input type="checkbox"/> Alcohol & Substance Abuse Services     |
| <input type="checkbox"/> Personalized Learning    | <input type="checkbox"/> Liberal Studies              | <input type="checkbox"/> Child & Family Services                |
| <input type="checkbox"/> Special Education        | <input type="checkbox"/> Psychology                   | <input type="checkbox"/> Community Development & Counseling     |
| <input type="checkbox"/> English                  | <input type="checkbox"/> Public Safety Administration |   |

### Online Programs:

- Online Degree Completion Program in Educational Studies (B.A.)

### Sports & Activities you would like to participate in at CSJ:

- |   |  |                                       |   |
|---|--|---------------------------------------|---|
| <input type="checkbox"/> Men's Basketball   | <input type="checkbox"/> Bowling       | <input type="checkbox"/> Golf         | <input type="checkbox"/> Women's Soccer     |
| <input type="checkbox"/> Women's Basketball | <input type="checkbox"/> Cheerleading  | <input type="checkbox"/> Softball     | <input type="checkbox"/> Women's Volleyball |
| <input type="checkbox"/> Baseball           | <input type="checkbox"/> Cross-Country | <input type="checkbox"/> Men's Soccer | <input type="checkbox"/> Other _____        |

## ESSAY QUESTION:

**Write an essay that responds to one of the following (250 word minimum):**

*You may type your response and attach a separate sheet of paper or email your essay to [admissions@csj.edu](mailto:admissions@csj.edu).*

### **Suggested topics**

- Think about someone who has had an impact on your life in a positive way, whether a family member, friend, teacher, coach or someone else. Explain that impact and the changes you made in your life as a result.
- Recount an incident or time when you experienced failure. How did it affect you and what lessons did you learn from it?
- Topic of your choice in relation to college preparation.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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College of

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St. JOSEPH  
RUTLAND, VERMONT

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*Small Wonder.* **BIG IDEAS.**

**[www.csj.edu](http://www.csj.edu)**

71 CLEMENT ROAD, RUTLAND, VT 05701

(802) 776-5205 | (877) 270-9998

ADMISSIONS@CSJ.EDU