UNDERGRADUATE APPLICATION FOR INTERNATIONAL ADMISSION



Doggett International Center 263 Alden Street Springfield, MA 01109-3797 (800) 343-1257 (413) 748-3215

C.H. CA FW C.C.				
For Office Use Only				

Springfield College Undergraduate Application Information for International Students

Springfield College has rolling admissions for international applicants for most programs. As a first-year international applicant, you may apply using this paper application or via the Common Application online.

To apply to Springfield College, please provide the following:

- 1. A completed application form with the \$50 application fee.
- 2. Your official high school transcript (forwarded from your school).
- One academic recommendation from a teacher or guidance counselor. This can be a letter or any standardized form (such as the Common Application form).
- 4. An essay on why you desire to attend Springfield College and what you hope to accomplish here.
- 5. Proof of English proficiency, if English is not your first language or an official language of your country of citizenship.

Springfield College recognizes the Test of English as a Foreign Language (TOEFL) as well as the International English Language Testing System (IELTS). The college also recognizes Michigan English Language Assessment Battery and Pearson Test of English Academic as proof of English proficiency. English Requirements: **TOEFL-IBT: 70**; and **IELTS: 6.0**

*International students generally do not need to submit SAT or American College Test scores as an admissions requirement. Transcripts will be evaluated. Appropriate language, math, and science requirements should have been met.

*Some programs may require additional credentials. Limited enrollment programs (physical therapy, athletic training, occupational therapy, and physician assistant) require that students complete shadowing hours and a supplement application for admission. Supplement applications for these programs can be found on the Common Application. These programs also have application deadlines that must be met.

Please contact the Springfield College Doggett International Center if you have any questions or concerns. Call the international office anytime Monday through Friday between 8:30 a.m. and 4:30 p.m. EST at (413) 748-3215.

PLEASE PRINT

ame			
Last (family)	First	Middle	Prefered First Name
me Address			
Number ar	nd Street		
			Home Telephone
City	Country	Zip	Country Code
iling Address (if different)			Effective until
	Number and Street		
			Cell Phone
City	Country	Zip	Country Code

CONTINUED

Email Address						
Sex Male Female	Date of Birth					
Country of Birth						
Country of Citizenship						
Do you currently hold a U.S. Visa?	s 🗌 No Type of Visa held					
Anticipated Enrollment September	year Januaryyear					
What most influenced this application?	year year ☐ Alumnus/a ☐ Campus Visit ☐ Co ☐ Springfield College Website ☐ Social	llege Fair 🔲 Current Student				
newspapers, and our own college/universit In order to respond to these requests, we as	ked by many, including the federal government y communities, to describe the racial/ethnic bac sk you to answer the following two questions:	kgrounds of our students and employees.				
Do you consider yourself to be Hispanic/Latino		lowing racial categories to describe yourself:				
Yes	American Indian or Alaska Nativ Asian	/e				
No	Black or African American					
	Native Hawaiian or Pacific Island	der				
	White					
Indicate your choice of program. Plea	se √one only.					
☐ Accounting	☐ Environmental Science	☐ Physician Assistant (Jan. 15 deadline)				
☐ American Studies	☐ Finance	☐ Psychology				
☐ Applied Exercise Science	☐ Health Care Management ☐ Health Promotion for Schools	☐ Recreation Management				
☐ Art ☐ Art Therapy	and Communities	□ Rehabilitation and Disability Studies□ Secondary Teaching Licensure				
☐ Athletic Training (Dec. 1 deadline)	☐ Health Science	Choose one major:				
Biology	Health Teaching Licensure	☐ Art				
☐ Business Management☐ Communication Sciences and Disorders	Major in Health Promotion for Schools and Communities	☐ Art Therapy				
☐ Communications/Sports Journalism	☐ History	□ Biology□ English				
☐ Computer and Information Sciences	☐ Marketing	☐ History				
☐ Computer Graphics/Digital Arts ☐ Criminal Justice	☐ Mathematics☐ Mathematics and Computer Technology	☐ Mathematics				
□ Dance	☐ Movement and Sports Studies	☐ Sociology☐ Special Education Teaching Licensure				
☐ Early Childhood Teaching Licensure	□ Nutritional Sciences	Choose one major:				
Major in Psychology	☐ Occupational Therapy (Jan. 15 deadline)☐ Physical and Health Education	☐ American Studies				
☐ Elementary Teaching Licensure Choose one major:	Teaching Licensure Major in	☐ English☐ Mathematics and				
☐ American Studies	Movement and Sports Studies	Computer Technology				
☐ English	Physical Education Teaching Licensure	☐ Sports Biology				
□ Mathematics and ○ Computer Technology	Major in Movement and Sports Studies Physical Therapy (Dec. 1 deadline)	☐ Sport Management				
☐ Emergency Medical Services Management	Undergraduate Major in Health Science	☐ Undeclared				
□ English	Doctorate in Physical Therapy					

EDUCATION				
Secondary School	Location	\	/ears Attended	Date of Graduation
Springfield College is committed to main commitment, the College requires application who have engaged in behavior that resulgation at any college, university, or seconstep in the admissions process. A previous does require review. With this in mino	ants for admission to one of its pro ted in injury to any person or pers dary school in which they were pro us conviction or previous miscondu	ograms of study who have onal property or who have eviously enrolled to disc uct does not automatica	ve been convicted ave a history of foi lose this informati	d of a felony or rmal disciplinary ion as a mandatory
 Have you ever been expelled, you have attended?	suspended, disciplined, or placed o	on probation by any secc	ndary school, coll	ege or university
	d of a criminal offense (including juinst you at this time? $\ \square$ Yes $\ \square$		a minor traffic viola	ition or are there
f you answered "yes" to either of these q your answers to the above questions ina- with updated information.				
Father or Guardian Name	Li	iving? Yes No	Occupation _	
Home Address	C	ity	State	Zip
Mother or Guardian Name	Li	iving? Yes No	Occupation _	
Home Address	c	ity	State	Zip
Are you the first in your family to attend	college? Yes No			
Profession or vocation you plan after gra	aduation			
Alternative				
Are you considering a career in the YMC	CA? Definitley Possibl	y 🗌 No		
f you have relatives who attended Sprir	ngfield College, please list them giv	ving relationship and cla	ass year (if knowr	1).
Please give the name and address of a S	Springfield College alumnus/a you	ı have known best (othe	er than a relative).	

Address

Name

WRITING-PERSONAL ESSAY

It is our hope to get to know you as well as possible through this application. Please submit on a separate sheet of paper a response to the following:

1. Please provide a statement that addresses your reasons for wanting to attend Springfield College and the objectives you hope to achieve.

In compliance with the Jeanne Clery Disclosure of Camus Security Policy and Crime Statistics Acts of 1998, Springfield College posts campus statistics at springfieldcollege.edu/home.nsf/AnnualCampusSecurityReport.

I understand that this application and all supporting credentials will be used for admissions purposes only. Disclosure of any information for official purpose will be at the discretion of the director of admissions.

As a prospective undergraduate or graduate student, I consent to the use of any photographic likeness of, video footage of, or any statement made by me, in the event Springfield College should wish to use them in any publication or advertisment.

Your Signature	Date
Parent or Guardian Signature	Date
(unless candidate is 18 years of age or over)	

Return this form with accompanying \$50 application fee (payable to "Springfield College") or appropriate fee waiver documentation to:

Springfield College Office of Undergraduate Admissions 263 Alden Street Springfield, MA 01109-3797

SUPPORTING CREDENTIALS DEADLINES

Athletic Training and Physical Therapy: Jan. 15 Physician Assistant and Occupational Therapy: Feb. 1

All other majors:

Spring enrollment: Dec. 1 Fall enrollment: July 15

Information provided on this form will be used for admission purposes only and will not become a part of the student's permanent record at Springfield College.

SPRINGFIELD COLLEGE APPLICATION FOR ADMISSION



ACADEMIC EVALUATION

Applicant Name				
	First	Middle	Last	
Address				
	Number and Street			
	City		State	Zip
We are sincerely Springfield Collec	ge. The information requeste	ne other than a relative. Ingness to complete this reference for the distribution of the distribution of the complete that the distribution of the complete that the distribution of the complete distribution of the comp	his report be completed tho	
numan-helping p	professions. As many of our g	and pre-professional school dedicate raduates will be working with young ber of student. This information is m	g people, our evaluation proc	ess does consider person-
We have attempt	ted to identify several areas v	which will assist us in the evaluation	of this applicant for admissio	n.

Please feel free to add additional comments which might seem appropriate.

Upon completion, please return to the Office of Undergradaute Admissions, Springfield College, 263 Alden Street, Springfield, MA 01109-3797. Please accept our sincere thanks for your assistance.

EVALUATION BY:

lame		Relation to applicant			
Address	Number and Street				
	City	State	Zip		

Length of time acquainted with applicant _

Please give a general statemer undergraduate program. If you					pleting the intended
Please rate the applicant in the	e following areas by checki	ng the appropriate	e box.		
	No Basis for Judgment	Below Average	Average	Good	Outstanding (top 2 percent of all students you've recommended)
Social-emotional					you've recommended)
Maturity					
Adaptability					
Responsibility					
Concern for Others					
Leadership					
Integrity					
Evaluator Signature				Dat	re