

# HIGH SCHOOL(S) AND/OR PREPARATORY SCHOOLS ATTENDED/ATTENDING:

(CEEB code number can be obtained from your high school guidance office)

Name of School	Location (City and State)	CEEB Code (6 digits)	Dates Attended (Yr. to Yr.)	Date of Graduation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Type of high school granting diploma:**

- Public
- Independent/Private

**If you did NOT graduate from high school, do you have a GED?**

- Yes. Year received: \_\_\_\_\_
- No

**TEST DATES** - Please list all dates that the following tests have been/will be taken:

**SAT I** or **ACT:** \_\_\_\_\_ / \_\_\_\_\_ (month) (year)    \_\_\_\_\_ / \_\_\_\_\_ (month) (year)    \_\_\_\_\_ / \_\_\_\_\_ (month) (year)    \_\_\_\_\_ / \_\_\_\_\_ (month) (year)

**TOEFL (Test of English as a Foreign Language)** or **ELPT (English Language Proficiency Test)** - if taken: \_\_\_\_\_ / \_\_\_\_\_ (month) (year)    \_\_\_\_\_ / \_\_\_\_\_ (month) (year)

**MAJOR PROGRAMS** - Please print your first and second choice of major *from the list below*:

- |                                |                                     |                                     |                        |
|--------------------------------|-------------------------------------|-------------------------------------|------------------------|
| <b>Art (History)</b>           | <b>Early Childhood Education</b>    | <b>Geography</b>                    | <b>Pre-Engineering</b> |
| <b>Art (Studio)</b>            | <b>Economics</b>                    | <b>Health and Consumer Sciences</b> | <b>Psychology</b>      |
| <b>Biology</b>                 | <b>Elementary Education</b>         | <b>History</b>                      | <b>Sociology</b>       |
| <b>Business Administration</b> | <b>English</b>                      | <b>Mathematics</b>                  | <b>Undeclared</b>      |
| <b>Chemistry</b>               | <b>Fashion Design and Retailing</b> | <b>Modern Languages (Spanish)</b>   |                        |
| <b>Communication Arts</b>      | <b>Food and Nutrition</b>           | <b>Nursing* (Post-R.N. only)</b>    |                        |
| <b>Computer Science</b>        | <b>Food Science</b>                 | <b>Politics</b>                     |                        |

**1st Choice:** \_\_\_\_\_ **2nd Choice:** \_\_\_\_\_

**\*The Nursing major is a post-R.N. program open only to Registered Nurses who already have an associate degree or a diploma in nursing. Please list your current R.N. license number or date on which you completed the state R.N. Licensure Exam:** \_\_\_\_\_

Please check if you are interested in any of the following special programs:

- Pre-Law     Pre-Medical     Pre-Dental     Pre-Veterinary     Secondary Education     Honors Program

Do you wish to be considered for the FSC program for students whose economic, cultural and/or educational background indicates they may benefit from academic and advising assistance?     Yes     No

**TOTAL NUMBER OF COLLEGES EVER ATTENDED:** \_\_\_\_\_

Have you completed any college courses?     Yes     No

Will you have completed twelve or more credit hours at date of entrance?     Yes     No

**Highest degree held at planned entrance date:**

- |  |   |
|--|---|
| <input type="checkbox"/> None (High School Diploma or GED)                       | <input type="checkbox"/> Registered Nurse                       |
| <input type="checkbox"/> Associate Degree from a Massachusetts Community College | <input type="checkbox"/> Registered Nurse and Associate Degree  |
| <input type="checkbox"/> Any other Associate Degree                              | <input type="checkbox"/> Registered Nurse and Bachelor's Degree |
| <input type="checkbox"/> Bachelor's Degree                                       | <input type="checkbox"/> Other (please describe) _____          |