

Student status (check one) Freshman Transfer Housing (check one) On Campus Commuter (from home)
 Attending (check one) Full-time Part-time Entering (check one) Fall Term 20____ Spring Term 20____

PLEASE CHECK YOUR DESIRED ADMISSION PLAN:

- Early Action – Application deadline is November 15; notification no later than December 15
- Regular Admission – Begins December 15; notification as soon as possible after all materials are received

Legal Name _____
Last Name First Name Middle Name

Preferred name _____ Email address _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Cell phone _____ County Residence _____

Gender: Male Female Non-Binary Prefer Not to Say

Birth date ____/____/____ Social Security No. (Optional) _____-_____-_____

Citizenship: US Citizen US Permanent Resident; Citizen of _____
 Other Citizenship Country _____ Visa Type _____

ETHNICITY (optional)

- American Indian or Alaska Native
- Asian
- Black or African American
- Hawaiian or Other Pacific Islander
- Hispanic or Latino
- White
- Other
- Prefer Not to Say

FAMILY

Name of father/guardian _____ Name of mother/guardian _____

Please list address (if different than above) for father, mother or guardian

Street _____ Street _____

City, state, zip _____ City, state, zip _____

What is the education level of your father/guardian and mother/guardian? _____

Relatives who have graduated from Westminster College or are currently attending:

 Year/Class _____ Relationship _____

 Year/Class _____ Relationship _____

EDUCATIONAL INFORMATION

High School you attend/graduated _____ Graduation year _____

City _____ State _____ Zip _____

I grant my high school permission to release my transcript to Westminster College, PA.

Please list below any colleges or universities you have attended. Transcripts from each of these institutions must be sent directly from the institution concerned. No evaluation will be made until these transcripts are received. This must be done whether or not you desire advanced standing for such work.

Name of college	Location (City, state)	Degree candidate?	Dates attended
_____	_____	_____	_____
_____	_____	_____	_____

SAT test scores EBRW _____ M _____ Date taken _____ Do you plan to retake? _____ Date _____

ACT test score Composite _____ Date taken _____ Do you plan to retake? _____ Date _____

INTENDED MAJOR

Please indicate your probable major field of study if you have a preference at this time. If undecided, please indicate.

1st choice _____ 2nd choice _____ Undecided

MAJORS		
ACCOUNTING	HUMAN RESOURCES MANAGEMENT	SPANISH
BIOCHEMISTRY	INTERNATIONAL BUSINESS	SPORTS MANAGEMENT
BIOLOGY	INTERNATIONAL STUDIES	THEATRE
BROADCASTING & MEDIA PRODUCTION	MARKETING & PROFESSIONAL SALES	UNDECIDED
BUSINESS ADMINISTRATION	MATERIALS SCIENCE	PRE-PROFESSIONAL PROGRAMS
CHEMISTRY	MATHEMATICS	ENGINEERING
CHILD & FAMILY STUDIES	MOLECULAR BIOLOGY	HEALTH SCIENCES
COMMUNICATION STUDIES	MUSIC	-DENTISTRY
COMPUTER INFORMATION SYSTEMS	MUSIC EDUCATION	-MEDICINE
COMPUTER SCIENCE	MUSIC PERFORMANCE	-OPTOMETRY
CRIMINAL JUSTICE STUDIES	NEUROSCIENCE	-PHYSICAL THERAPY
DIGITAL JOURNALISM	NURSING	-PHYSICIAN ASSISTANT
EDUCATION	PHILOSOPHY	-PODIATRY
ENGINEERING PHYSICS	PHYSICS	-VETERINARY MEDICINE
ENGLISH	POLITICAL SCIENCE	LAW
ENVIRONMENTAL SCIENCE	PSYCHOLOGY	MINISTRY
FINANCIAL ECONOMICS	PUBLIC RELATIONS	MUSIC THERAPY
FINE ART	RELIGION	OCCUPATIONAL THERAPY
HISTORY	SOCIOLOGY	

YOUR PERSONAL STATEMENT OR WRITING SAMPLE (optional)

On a separate sheet of paper, please include a personal statement or writing sample (250-500 words) with your application. It could be a paper you have already written for one of your classes or something new on a topic of your choice.

EXTRACURRICULAR ACTIVITIES

	NO. OF YEARS YOU PARTICIPATED	POSITION OR EVENT/SPECIAL RECOGNITION	DO YOU PLAN TO PARTICIPATE IN COLLEGE?
1. _____			
2. _____			
3. _____			
4. _____			

Have you ever been convicted of any criminal offense other than minor traffic violations? Yes No

Please provide a full explanation: _____

FINAL STEPS

I declare the information provided by me is accurate to the best of my knowledge.

Signature of applicant (Required) _____ Date _____

DON'T FORGET TO

1. Complete all parts of the application form.
2. Send application to the Office of Admissions with the \$35 non-refundable application fee.
3. Send an official transcript of your work from all secondary schools and/or colleges you have attended. These transcripts must be sent directly from the institutions concerned.
4. SAT or ACT examinations are required. Have the results of these examinations sent to the Admissions Office.

MAIL ALL ADMISSION MATERIALS TO:

OFFICE OF ADMISSIONS
 WESTMINSTER COLLEGE
 319 S. MARKET ST.
 NEW WILMINGTON, PA 16172-0001

Westminster College does not discriminate, and will not tolerate discrimination, on the basis of race, color, national origin, ethnic origin, sex, sexual orientation, age, or handicap or disability as those terms are defined under applicable law, in the administration of any of its educational programs, activities, or with respect to admissions and employment. In its employment practices, the College may consider the individual's support of the philosophy and purposes of Westminster as stated in the Undergraduate Catalog. Otherwise, Westminster does not discriminate, and will not tolerate discrimination, on the basis of religion or creed. Inquiries may be directed to the Equal Opportunity Officer, Westminster College, New Wilmington, PA 16172 0001, (724) 946-7247.

Westminster College is related to the Presbyterian Church (U.S.A.) through the Synod of the Trinity.