EXTRACURRICULAR INTEREST

Please indicate your interest in any activities listed below:

- Academic Clubs in Your Area of Interest
- Leadership Organizations
  - Student Government
  - Honors Student Association
  - Freshman Emerging Leaders
- Campus Media
  - Newspaper
  - Student TV News
  - Yearbook
  - Radio
- Community Service
- Intramural Sports
- Religious Organizations
- Programming Organizations
  - Student Event Planning
  - Program Council
  - Hawk's Nest
  - Late Night Restaurant
- Musical and Comedy Groups
  - Pep Band
  - Choir
  - Improv Comedy
- Service to the University
  - Campus Tour Guides
  - Resident Assistants
  - Orientation Assistants
- ROTC

I certify that all items on this application are answered correctly and completely. I understand that incomplete information, the withholding of information or incorrect information may disqualify me for admission to the University of Hartford or may later be the basis for my withdrawal or dismissal.

Student's Signature: ________________________ Date: ______________

The University of Hartford admits students without regard to race, age, color, creed, gender, physical ability, sexual orientation and national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students of the University. The $35 Application Fee is waived if this application is submitted before November 15th.

Please return this application to:
Office of Admission and Financial Assistance
University of Hartford
200 Bloomfield Avenue
West Hartford, CT 06117-1599

Contact Us:
Telephone: 860-768-4296
Toll Free: 800-947-4303
Fax: 860-768-4961
Email: admission@hartford.edu
http://admission.hartford.edu

A VARIETY OF ACADEMIC AND STUDENT SUPPORT SERVICES.

THE SCHOOLS AND COLLEGES OF THE UNIVERSITY OF HARTFORD:

BARNEY SCHOOL OF BUSINESS
COLLEGE OF ENGINEERING, TECHNOLOGY & ARCHITECTURE
THE HARTT SCHOOL

COLLEGE OF EDUCATION, NURSING & HEALTH PROFESSIONS*
COLLEGE OF ARTS & SCIENCES
HILLYER COLLEGE

HARTFORD ART SCHOOL

*Nursing is a part-time degree completion program for students who have an associate degree in nursing.
PERSONAL DATA

Student's Social Security Number:

Legal Name:

Address: City / State / Zip

Telephone Number: Email Address:

Date of Birth: Month / Day / Year Gender:

High School CEEB Code:

Indicate the major you plan to pursue:  undecided

Citizenship: I am a U.S. Citizen I am an eligible non-citizen

(If you are not a citizen or eligible non-citizen, please request and complete an International Student Application found at: http://admission.hartford.edu/intl)

Race (optional): Black Hispanic White American Indian or Alaskan Native

Asian or Pacific Islander Other

Are you interested in a second major or minor? Yes No If yes, please indicate.

Please indicate any of the following in which you are interested: Honors Internships Pre-Law Pre-Med Study Abroad

MAJORS


PROFESSIONAL PROGRAMS

Pre-Chiropractic Pre-Cryotherapy Pre-Osteopathy Pre-Podiatry

HEALTH SCIENCE PRE-PROFESSIONAL PROGRAMS

Pre-Chiropractic Pre-Cryotherapy Pre-Osteopathy Pre-Podiatry

There are accelerated programs with affiliation agreements that allow qualified students to complete bachelor's & doctoral degrees within 7 years or less.

Students submitting an application for music, dance or theatre must complete a supplemental application and audition. If the supplementary application is not included in this mailing, you can find it at: http://hartweb.hartford.edu/adm-how.htm

Students submitting an application to the Hartford Art School must complete a portfolio to review. For more information, please visit www.hartfordartschool.org and click on Admissions.
HOUSING AND FINANCIAL AID

Are either of your parents an alumnus or alumna of the University of Hartford?  □ Yes  □ No
Are any members of your family currently employed by the University of Hartford?  □ Yes  □ No
Do you have a brother or sister currently attending or applying to the University of Hartford? (If yes, please provide name) ________________________________

Do you plan to live:  □ In University Housing  □ Off-Campus Apartment
□ with Parents

Do you plan to request Financial Aid during your first academic semester?  □ Yes  □ No
If your answer to this question is yes, you must file a Free Application for Federal Student Aid (FASFA) at www.fafsa.ed.gov to be considered for need-based financial assistance. Priority filing date is February 1st.

...a rich diversity of academic opportunity

SMALL CLASSES THAT FACILITATE INTERACTION AND A SUPPORTIVE ENVIRONMENT

A BEAUTIFUL 320 ACRE CAMPUS WITH A RIVER RUNNING THROUGH IT

Father’s Name: __________________________________________________________
Last / First / Middle  □ Living  □ Deceased
Home Address: __________________________________________________________
(if different from Student) Street / City / State / Zip
Home Phone: ____________________________________________________________
(if different from Student) Occupation: Describe Briefly ____________________
Name of business or organization
________________________________________________________
Business Address: ________________________________________________________
Business Phone: _________________________________________________________
Email Address: __________________________________________________________
Name of College and/or professional school if any: ___________________________
Degree / Year

Mother’s Name: _________________________________________________________
Last / First / Middle  □ Living  □ Deceased
Home Address: __________________________________________________________
(if different from Student) Street / City / State / Zip
Home Phone: ____________________________________________________________
(if different from Student) Occupation: Describe Briefly ____________________
Name of business or organization
________________________________________________________
Business Address: ________________________________________________________
Business Phone: _________________________________________________________
Email Address: __________________________________________________________
Name of College and/or professional school if any: ___________________________
Degree / Year
REQUİRED WRİTİNG SAMPLE

CONSIDERING YOUR STRENGTHS, TALENTS AND INTERESTS, WHY DO YOU WİSH TO ATTEND THE UNIVERSITY OF HARTFORD? OR YOU MAY SUBMIT A PREPARED WRİTİNG SAMPLE.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
...opportunities to practice as you learn