

**EXCHANGE APPLICATION CHECKLIST
HOBART AND WILLIAM SMITH COLLEGES**

YOUR NAME: _____

SEMESTER/YEAR YOU ARE APPLYING FOR _____

Deadline for applications: March 1 for Fall, Oct 1 for Spring

I enclose the following to complete my exchange application:

- Exchange application form, including personal essay
- Faculty Evaluation
- University Report, including an official transcript
- Declaration of Finances, including bank statements and/or other documentation

Signature

Date

Please return all application materials to:

Center for Global Education
Hobart and William Smith Colleges
Trinity Hall
Geneva, NY 14456
U.S.A.

EXCHANGE STUDENT APPLICATION HOBART AND WILLIAM SMITH COLLEGES

Application Deadline: March 1/Oct 1

PERSONAL DATA

Legal Name _____
Last/Family First Middle Jr., etc.
Enter name **exactly** as it appears on passports or other official documents

Former last name(s) if any _____ Gender male female

Birthdate _____ E-mail address _____
mm/dd/yyyy

Permanent Home Address _____
Number and street

City or town State/Province Country PostalCode

Permanent Home Phone _____

If different from above, please give your mailing address for all admission correspondence.

Mailing Address (from _____ to _____)
mm/yyyy mm/yyyy Number and street

City or town State/Province Country PostalCode

Phone at mailing address _____ Cell phone _____

Citizenship US citizen Dual US citizen; please specify other country of citizenship _____
 US Permanent Resident visa; citizen of _____ Alien Registration Number _____
 Other Citizenship _____
Country(ies) Visa type

If you are not a US citizen but live in the United States, how long have you been in the country? _____

Possible area(s) of academic concentration/major _____ or undecided

Possible career or professional plans _____ or undecided

The following items are optional. No information you provide will be used in a discriminatory manner.

Place of Birth _____
City State/Province Country

First language, if other than English _____ Language spoken at home _____

If you wish to be identified with a particular ethnic group, please check all that apply

- African American, Black Mexican American, Chicano
 Native American, Alaska Native (tribal affiliation _____ enrolled _____) Native Hawaiian, Pacific Islander
 Asian American (countries of family's origin _____) Puerto Rican
 Asian, including Indian Subcontinent (countries _____) White or Caucasian
 Hispanic, Latino (countries _____) Other (specify _____)

EDUCATIONAL DATA

University you now attend (or from which you graduated) _____ Date of Entry _____

Permanent Home Address _____ CEEB/ACT code _____
*Number and street**City or town* _____ *State/Province* _____ *Country* _____ *Postal Code* _____

Exchange Coordinator's Name _____ Coordinator's Email _____

Position _____ Phone _____ Fax _____

List all colleges/universities at which you have taken courses for credit. You must enclose an official transcript for each institution.

Name of College/University & CEEB/ACT Code	Location (City, State/Province, Postal code, Country)	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Secondary School from which you graduated _____

Name of Diploma _____ Date received _____

TEST INFORMATION

ONLY the TOEFL test is required for admission (if your first language is not English). If you've taken or plan to take the exams below, please provide details. The official scores from the appropriate testing agency must be submitted to us.

**Test of English as a second language
(TOEFL or other exam i.e. IB English, GCSE English – Higher Level)**

Test	Date taken/ to be taken	Score	Test	Date taken/ to be taken	Score
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EMERGENCY CONTACT

Please list the person who should be contacted in case of emergency.

Name _____ Gender male female
Last/Family *First*

Relationship to you _____

Home address if different from yours _____

EMERGENCY CONTACT (continued)

E-mail _____

Home phone _____

Cell phone _____

Work phone _____

Work E-mail _____

EXTRACURRICULAR, PERSONAL AND VOLUNTEER ACTIVITIES

Please list your **principal** extracurricular activities below.

Activity	Dates
_____	_____
_____	_____
_____	_____
_____	_____

ACADEMIC HONORS

Briefly list or describe any of your scholastic distinctions or honors.

WORK EXPERIENCE

List any job (including summer employment) you have held during the past three years.

Specific nature of work	Employer	Approximate dates of employment	Approximate no. of hours/week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SHORT ANSWER

Please describe which of your activities (extracurricular activities or work experience) has been most meaningful and why (150 words or less).

PERSONAL ESSAY

This personal statement helps us become acquainted with you in ways different from courses, grades, test scores and other objective data. It will demonstrate your ability to organize thoughts and express yourself. We are looking for an essay that will help us know you better as a person and as a student. Please write an essay (250-500 words) addressing ONE of the questions below:

1. A range of academic interests, personal perspectives and life experiences adds much to the educational mix. Given your personal background, describe an experience that illustrates what you would bring to the diversity in a college community, or an encounter that demonstrated the importance of diversity to you.

OR

2. How will participation in this exchange program help you meet your academic goals? How does it relate to your degree requirements? Why did you choose HWS for your exchange experience?

Attach your essay on a separate sheet(s). You must put your full name, date of birth and name of your home university on each sheet.

REQUIRED SIGNATURE

I certify that all information in my application, including my personal essay, is my own work, factually true and honestly presented.

Signature _____

Date _____

Application Deadline: March 1/October 1

Please return all application materials to:

Center for Global Education
Hobart and William Smith Colleges
Trinity Hall
Geneva, NY 14456, U.S.A.

**FACULTY EVALUATION
HOBART AND WILLIAM SMITH COLLEGES**

TO THE APPLICANT

Please fill in the information below and give this form to a faculty member who has taught you an **academic** subject.

Birthdate _____
mm/dd/yyyy

Gender male female

Student Name _____
Last/Family First Middle

Address _____
Number and Street City or Town State/Province

Country _____ Zip code or Postal Code _____

University you now attend _____ CEEB/ACT code _____

TO THE PROFESSOR

The selection committee finds candid evaluation helpful in choosing among highly qualified candidates. We are primarily interested in what academic and personal qualifications the applicant has that would make him or her an appropriate candidate for participating in an exchange program.

A photocopy of this reference form, or another reference you may have prepared on behalf of this student, is acceptable. We are grateful for your assistance. *Be sure to sign below then return this form to the student in a sealed envelope.*

Professor's Name _____ Position _____
Please print or type

University & Department _____

University Address _____

Professor's Phone _____ Date _____

Signature _____ Date _____

BACKGROUND INFORMATION

How long have you known this student and in what context? _____

What are the first words that come to mind to describe this student? _____

List the courses you have taught this student, the student's year in school and level of difficulty

EVALUATION

Please write (or attach on a separate sheet) what you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the candidate's intellectual promise, motivation, maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, enthusiasm, concern for others, respect accorded by faculty, and reaction to setbacks. We welcome information that will help us to differentiate this student from others.

RATINGS

Compared to other students in his or her class year, how do you rate this student in terms of:

<i>No basis</i>		<i>Below Average</i>	<i>Average</i>	<i>Good (above average)</i>	<i>Very Good (well above average)</i>	<i>Excellent (top 10%)</i>	<i>Outstanding (top 5%)</i>	<i>One of the top few encountered in my career</i>
	Creative, original thought							
	Motivation							
	Self-confidence							
	Independence and initiative							
	Intellectual ability							
	Academic achievement							
	Written expression of ideas							
	Effective class discussion							
	Disciplined work habits							
	Potential for growth							

CONFIDENTIALITY

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at a member college. In accordance with the Family Educational Rights and privacy Act of 1974, matriculating students *do* have access to their permanent files, which may include forms such as this one. Unless required by state law, colleges may not provide access to admission records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation. These colleges are committed to administer all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, handicap, or gender.

UNIVERSITY REPORT - HOBART AND WILLIAM SMITH COLLEGES

TO THE APPLICANT

Please fill in the information below and give this form to your academic advisor or exchange coordinator.

Birthdate _____ Gender male female
mm/dd/yyyy

Student Name _____
Last/Family First Middle

Address _____
Number and Street City or Town State/Province

Country _____ Zip code or Postal Code _____

University you now attend _____ CEEB/ACT code _____

Current year courses – please indicate title, level (AP, introductory, advanced honors, etc) and credit value of all courses you are taking this year.

Semester	Course Title	Course level	Credit value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TO THE ADVISOR OR EXCHANGE COORDINATOR

Please attach the applicant's official transcript, including courses in progress, a school profile and transcript legend. After filling in the blanks below, please use both sides of this form to describe the applicant. Please provide all available information for this candidate. **Be sure to sign below then return this form and the transcript to the student in a sealed envelope.**

Class rank _____ in a class of _____, covering period from _____ to _____
mm/yyyy mm/yyyy

The rank is weighted not weighted. Please indicate rank to the nearest tenth from the top _____

Cumulative GPA _____ on a _____ scale, covering period from _____ to _____
mm/yyyy mm/yyyy

The GPA is weighted not weighted. The School's passing mark is _____

In comparison with other university students at our school, the applicant's course selection is
 extremely demanding very demanding demanding average less than demanding

Student's expected graduation date _____

Advisor's/Coordinator's Name _____ Position _____

Signature _____ Date _____

University Name _____ Advisor's/Coordinator's email _____

Advisor's/Coordinator's Address _____

Advisor's/Coordinator's Phone _____ Fax _____

EVALUATION

Please write (or attach on a separate sheet) what you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the candidate's intellectual promise, motivation, maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, enthusiasm, concern for others, respect accorded by faculty, and reaction to setbacks. We welcome information that will help us to differentiate this student from others.

How long have you known this student and in what context? _____

What are the first words that come to mind to describe this student? _____

RATINGS

Compared to other students in his or her class year, how do you rate this student in terms of:

<i>No basis</i>	<i>Below Average</i>	<i>Average</i>	<i>Good (above average)</i>	<i>Very Good (well above average)</i>	<i>Excellent (top 10%)</i>	<i>Outstanding (top 5%)</i>	<i>One of the top few encountered in my career</i>
Academic achievement							
Extracurricular accomplishments							
Personal qualities and character							
Creativity							

CONFIDENTIALITY

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at a member college. In accordance with the Family Educational Rights and privacy Act of 1974, matriculating students **do** have access to their permanent files, which may include forms such as this one. Unless required by state law, colleges may not provide access to admission records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation. These colleges are committed to administer all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, handicap, or gender.

FINANCIAL RESOURCES

Please indicate the sources of your funding for each semester and the amounts available from each source. Funds may come from several sources, if necessary. Amounts should be in U.S. dollars.

	First Semester	Second Semester
<p>Personal Savings</p> <p>An original bank statement or letter from your bank verifying availability of funds is required.</p> <p>Bank statement/letter <input type="checkbox"/> is enclosed <input type="checkbox"/> will be sent</p>		
<p>Parents/Relatives/Personal Sponsors</p> <p>Name _____</p> <p>Address _____ _____</p> <p>An affidavit of support is required and must be accompanied by an original bank statement showing parent/relative/sponsor has adequate available financial resources.</p> <p>Letter of support <input type="checkbox"/> is enclosed <input type="checkbox"/> will be sent</p> <p>Bank statement/letter <input type="checkbox"/> is enclosed <input type="checkbox"/> will be sent</p>		
<p>Sponsoring Organization/ Employer/Government Agency</p> <p>Name _____</p> <p>Address _____ _____</p> <p>An official copy of the terms of support specifying amounts for all expenses and the length of time covered by the award is required.</p> <p>Letter showing award terms</p> <p><input type="checkbox"/> is enclosed <input type="checkbox"/> will be sent</p>		
<p>I certify that the total amount (excluding travel funds) available for my semester/year of study at Hobart and William Smith Colleges is U.S. \$ _____. In addition, I certify that the information provided above is correct and complete.</p> <p>Signature _____ Date _____</p>		