

## 2011-12 FIRST-YEAR APPLICATION

For Spring 2012 or Fall 2012 Enrollment

## APPLICANT

APPLI	CANI	
Legal Name Last/Family/Sur (Enter name exactly as it appears on official documents.)	First/Given Mida	lle (complete) Jr., etc.
Preferred name, if not first name (only one)	Former last name(s)	
Birth Date O Female O Male	US Social Security Number, if any	
Preferred Telephone O Home O Cell Home ()		
Area/Country/City Code E-mail Address		Sity Code
Permanent home address		Apartment #
City/Town County or Parish	State/Province	Country ZIP/Postal Code
If different from above, please give your current mailing address for all admis	ssion correspondence.	(from to)
Current mailing address		(mm/dd/yyyy) (mm/dd/yyyy)
Current mailing address		Apartment #
City/Town County or Parish	State/Province	Country ZIP/Postal Code
If your current mailing address is a boarding school, include name of school here:		
Your answers to these questions will vary for different colleges. If the online system di chose not to ask that question of its applicants.	E PLANS id not ask you to answer some of the que	stions you see in this section, this college
College	Deadline	
		mm/dd/yyyy
Entry Term: O Fall (Jul-Dec) O Spring (Jan-Jun)	Do you intend to apply for need-based Do you intend to apply for merit-base	
Decision Plan         Academic Interests	Do you intend to be a full-time studen	•
	Do you intend to enroll in a degree pro	
	Do you intend to live in college housir	
Career Interest		to earn?
DEMOCI	RAPHICS	
Citizenship Status	1. Are you Hispanic/Latino?	vain) $\bigcirc$ No If yes, please describe your background.
Non-US Citizenship		
	<ol> <li>Regardless of your answer to the pr yourself. (Check one or more and de</li> </ol>	ior question, please indicate how you identify
Birthplace City/Town State/Province Country	· · ·	luding all Original Peoples of the Americas)
Years lived in the US? Years lived outside the US?	Are you Enrolled? $\bigcirc$ Yes $\bigcirc$ No If yes, plea	
Language Proficiency (Check all that apply.)		
S(Speak) R(Read) W(Write) F(First Language) H(Spoken at Home) S R W F H	Asian (including Indian subcontinent	t and Philippines)
	O Black or African American (including	Africa and Caribbean)
00000		under (Original Decalas)
<b>Optional</b> The items with a gray background are optional. No information you provide will be used in a discriminatory manner.	<ul> <li>Native Hawaiian or Other Pacific Isla</li> </ul>	inder (Uriginal Peoples)
Religious Preference	$\bigcirc$ White (including Middle Eastern)	
US Armed Services veteran status		

## FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

#### Household

Parent 1: O Mother O Father O Unknown		Parent 2: O Mother O Father O Unknown				
Is Parent 1 living? O Yes O No (Date Deceased	) <b>)</b>	Is Parent 2 living? O Yes	$\supset$ No (Date Deceased _	) 		
Last/Family/Sur First/Given Mi	ddle Title (Mr./Mrs./Ms./Dr.)	Last/Family/Sur	First/Given Midd	lle Title (Mr./Mrs./Ms./Dr.)		
Country of birth		Country of birth				
Home address <b>if different</b> from yours		Home address <b>if different</b> fro	m yours			
Preferred Telephone: $\bigcirc$ Home $\bigcirc$ Cell $\bigcirc$ Work (	) /Country/City Code	Preferred Telephone: O Home		) nuntry/City Code		
E-mail		E-mail				
Occupation		Occupation				
Employer		Employer				
College (if any)	CEEB	College (if any)		CEEB		
Degree	Year	Degree		Year		
Graduate School (if any)	CEEB	Graduate School (if any)		CEEB		
Degree	Year	Degree		Year		
Country of birth	ddle Title (Mr./Mrs./Ms./Dr.)	Siblings Please give names and ages of grades K-12 (or international e attended or are currently atter institution, degree earned, and three siblings, please list them	equivalent), list their grade nding college, give the nan a approximate dates of atte	e levels. If they have nes of the undergraduate endance. If more than		
Home address if different from yours		Name	Age & Grade	Relationship		
		College Attended		CEEB		
Preferred Telephone: $\bigcirc$ Home $\bigcirc$ Cell $\bigcirc$ Work (	) Country/City Code	Degree earned or expected	Date:	<b>S</b> <i>mm/yyyy – mm/yyyy</i>		
E-mail		Name	Age & Grade	Relationship		
Occupation		College Attended		CEEB		
Employer		Degree earned	Dates	S		
College (if any)	CEEB	or expected		тт/уууу – тт/уууу		
Degree	Year	Name	Age & Grade	Relationship		
Graduate School (if any)	CEEB	College Attended		CEEB		
Degree		Degree earned or expected	Dates	<b>S</b>		

### EDUCATION

Second	arv	Sch	ools

Entry Date	)	Graduation	Date		School Type		: O Charter	○ Independent		⊖ Hr	me School
intry Date	,			/dd/yyyy						0110	
Address _							0	CEEB/ACT Code			
N	umber & Street										
City/Towr	1					State/Provin	ce	Country		ZII	P/Postal Cod
	's Name										
E-mail			Tele	phone (	)		Fax (	)			
st all oth	er secondary schools	-	-		-				-	•	
	School Name & C	EEB/ACT Code			Location (City, S	tate/Provinc	e, ZIP/Postal C	ode, Country)	Dates At	ttended	(mm/yyyy)
ease list	any community progr	am/organizatio	n that has provi	ded free assis	tance with your	application p	process:				
vour edu	ication was or will be i	interrunted nle	ase indicate so	here and nrov	ide details in the	Δdditional I	nformation se	ction.			
-											
	& Universities Re	eport all college	e attendance (inc	cluding online)	since 9 <sup>th</sup> grade	and indicate	as College Co	ourse (CO) or Enrich	iment Program	(EP) ho	sted on a
college ca	•						D 0 1				-
Colleg	e/University Name & CEEB	ACT Code	Location (City, S	State/Province, A	ZIP/Postal Code, Co	untry)	Degree Candi Yes No	idate? CO EP	Dates Attended nm/yyyy – mm/yyy		egree Earne
										y	
							_ O C	) 00 _			
							_ O C	) 00 _			
Vere you i	issued a transcript for	any work liste	d above? $\bigcirc$ Yes	s ⊖No lfye	es, please have a	an official tra	nscript sent as	s soon as possible.			
				٨	CADEMI	CS					
	eported information in										
	nd arrange for official , please report the hig								es. where bes	st Score	is are
			-						<b>14</b> /a : a la ta		
Grades	Class Rank	Class S	olze	_ weighted?	∪ Yes ∪ No	GP/ (if av	A railable)	Scale	weighte	a? ()	Yes 🔿 No
ACT	Exam Dates:				Best Scores:						
	(past & future) mm/yy	yy mm/yy	yy mm/yyyy		(so far)	COMP	mm/yyyy	English mr	n/yyyy	Math	mm/yyyy
					_	Reading	mm/yyyy	Science mr	п/уууу И	Vriting	mm/yyyy
SAT	Exam Dates:				Best Scores: _						
	(past & future) mm/vv	vv mm/vv	vv mm/vvvv		(so far) (	Critical Reading	mm/yyyy	Math mi	n/vvvv W	(ritina	mm/vvvv

	(publica ratario)				(00 101)	onnour noue		maan		 
TOEFL/	Exam Dates:				Best Score:					
IELTS	(past & future)	mm/yyyy	mm/yyyy	mm/yyyy	(so far)	Test	Score	mm/yyyy		
AP/IB/SAT	Best Scores:									
Subjects	(per subject, so far)	mm/yyyy		Type & Subject		Score	mm/yyyy		Type & Subject	 Score
	-	mm/yyyy		Type & Subject		Score	mm/yyyy		Type & Subject	 Score
	-	mm/yyyy		Type & Subject		Score	mm/yyyy		Type & Subject	 Score
	-	mm/yyyy		Type & Subject		Score			Type & Subject	 Score

**Current Courses** Please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

Full Year/First Semester/First Trimester

Second Semester/Trimester

Third Trimester

or additional first/second term courses if more space is needed

Honors Briefly list any academic distinctions or honors you have received since the 9<sup>th</sup> grade or international equivalent (e.g., National Merit, Cum Laude Society).

olocitob) orifotate or regional wiwationaly (international)		
Grade level or post-graduate (PG) 9 10 11 12 PG 0 0 0 0 0	Honor	Highest Level of Recognition S S/R N I O O O O
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00000		0000
00000		0000
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## EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE

**Extracurricular** Please list your **principal** extracurricular, volunteer, and work activities **in their order of importance to you**. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.

Grade level or post-graduate (PG) 9 10 11 12 PG	Approx time s Hours per week	in the a	ou participate activity? Summer/ School Break	Positions held, honors won, letters earned, or employer	If applicable, do you plan to participate in college?
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Activity		 			
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Activity					
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Activity					

## WRITING

Please briefly elaborate on one of your extracurricular activities or work experiences in the space below.

Please write an essay of 250 – 500 words on a topic of your choice or on one of the options listed below, and attach it to your application before submission. **Please indicate your topic by checking the appropriate box.** This personal essay helps us become acquainted with you as a person and student, apart from courses, grades, test scores, and other objective data. It will also demonstrate your ability to organize your thoughts and express yourself. *NOTE: Your Common Application essay should be the same for all colleges. Do not customize it in any way for individual colleges. Colleges that want customized essay responses will ask for them on a supplement form.* 

- ① Evaluate a significant experience, achievement, risk you have taken, or ethical dilemma you have faced and its impact on you.
  - 2 Discuss some issue of personal, local, national, or international concern and its importance to you.
  - 3 Indicate a person who has had a significant influence on you, and describe that influence.
  - Describe a character in fiction, a historical figure, or a creative work (as in art, music, science, etc.) that has had an influence on you, and explain that influence.
- 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.
- **6** Topic of your choice.

Additional Information Please attach a separate sheet if you wish to provide details of circumstances or qualifications not reflected in the application.

#### **Disciplinary History**

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- ① Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9<sup>th</sup> grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution. Yes No
- ② Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Yes No [Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

Note: Applicants are expected to immediately notify the institutions to which they are applying should there be any changes to the information requested in this application, including disciplinary history.

### **SIGNATURE**

Appl	ication	I Fee	Payment	If this colled	ae requires	an application	1 fee.	, how will	you be	paying it?

○ Online Payment ○ Will Mail Payment ○ Online Fee Waiver Request ○ Will Mail Fee Waiver Request

#### **Required Signature**

- I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have certified be false.
- I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.
- I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature 🦄

mm/dd/yyyy

Date \_

*Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.* 



# Supplemental Application

First Name:	Last Name:									
GENERAL INFORMATION										
Term for which you are applying:										
Your major area of interest:	Your major area of interest:									
You are applying as a:  Freshman  Tr	ransfer									
Have you previously applied to Stony Brook Univ	versity? 🛛 Yes 📮 No If yes, for which term	/year?								
Indicate if you identify yourself as Learnin	ng Disabled 🔲 Physically Disabled 🔲 Both									
RESIDENCY INFORMATION Are you a New York State Resident?	□ No If yes, but less than 1 year, he	ow many months?								
EDUCATIONAL OPPORTUNITY PROGRAM (EOP) INFORMATION EOP is a program for New York State residents. All EOP applicants must meet academic and financial eligibility requirements. To determine eligibility, visit <i>www.stonybrook.edu/eopaim/eligibility</i>										
DO NOT APPLY FOR EOP UNLESS YOU HAVE I										
Are you applying for the Educational Opportunity	y Program (EOP)?  Yes No									
Transfer Applicants Only: Mark here $\Box$ if you a	re (or were previously) enrolled in EOP, College Discover	ry, HEOP or SEEK.								
INTERNATIONAL RESIDENCY INFOR If you are not a permanent resident, have you ap		□ No								
If you hold a VISA, what is the VISA expiration of	date?									
Note: If you are currently studying on an F-1 Visa, or wish to obtain one, you must complete all questions regarding citizenship in the Demographics section of the Common Application.										
FAMILY/LEGACY INFORMATION If a member of your family attended or graduate and graduation year.	d from Stony Brook University, please indicate their nar	me, relationship to you,								
Legacy #1 Name	Relationship	_ Graduation Year								
Legacy #2 Name	Relationship	_ Graduation Year								
Legacy #3 Name	Relationship	_ Graduation Year								



# Supplemental Application

First Name:	I	Last Name:				
EDUCATIONAL INFORM		n: 🖵 CLEP	A-Level Exams			
If the information is available at awarded:	the time of this a	application, indicate below any ac	cademic distinctions or honors you have been			
Valedictorian	🖵 National Meri	it Semi-Finalist/Finalist				
Salutatorian	🖵 Intel Competi	ition Semi-Finalist/Finalist				
Briefly state why you are considering Stony Brook University:						

## HONORS/SPECIAL PROGRAMS

All high-achieving freshman applicants are automatically considered for University Scholars, a program for academically talented students which offers priority course registration, special academic advising, and a variety of academic and extracurricular opportunities. Applicants who would also like to be considered for the special programs listed below or merit scholarships should complete their application and provide all necessary credentials by January 15th.

If you wish to be considered for The Honors College and/or Women in Science & Engineering (WISE), please indicate your selection below. Consideration for either program requires a minimum combined SAT Math and Critical Reading score of 1300 or an ACT composite score of 29 or higher, and an unweighted high school grade point average of 93.

- □ Honors College (freshman applicants only)
- □ Women in Science and Engineering (freshman applicants only)
- Both
- □ I do not wish to be considered for either of these two programs

You may apply for both The Honors College and WISE, however applicants can only be accepted into one program. If you selected both, please indicate your preferred program.

□ Honors College □ Women in Science and Engineering (WISE) Program

Stony Brook also offers three integrated eight-year Bachelor/M.D. and Bachelor/D.D.S. options to a very select group of fall <u>freshman applicants</u> admitted into The Honors College, Women in Science and Engineering (WISE), or the College of Engineering & Applied Sciences. Consideration for any of the programs below requires a minimum unweighted high school grade point average of 95, a minimum combined SAT Math and Critical Reading Score of 1350 (the ACT will not be used as a substitute for the SAT), and documentation of U.S. citizenship or permanent residency. Note: Students may only apply for one of these programs.

- □ Scholars for Dental Medicine (must also select The Honors College)
- □ Scholars for Medicine (must also select The Honors College and/or WISE program)
- □ Engineering Scholars for Medicine (must be a freshman applicant to a Bachelor of Engineering degree program)
- $\hfill\square$  I do not wish to be considered for any of these three programs



# Supplemental Application

First Name:

Last Name:

## RECOMMENDATIONS

All Freshman applicants are required to submit one letter of recommendation from a counselor. In addition, those students applying to Honors, WISE, Scholars for Medicine, Scholars for Dental Medicine and Engineering Scholars for Medicine are required to submit two teacher letters of recommendation.

All recommendations should be either submitted electronically through the Common Application or faxed to (631) 632-9898.

Please be sure your full name, date of birth, and home address are included on all correspondence.

### HONORS/WISE ESSAY

If you are applying to Stony Brook's Honors College or WISE Program, you must write an essay on topic #1 from the Common Application's Personal Essay section: *Evaluate a significant experience, achievement, risk you have taken, or ethical dilemma you have faced and its impact on you.* If you already provided an essay on this topic in the Common Application, you do not need to respond to this question a second time. Otherwise, please write an essay in response to this question and attach it to this Supplemental Application.

- □ I am <u>not</u> applying to Honors or WISE
- □ I am applying to Honors and/or WISE and already completed and submitted an essay on topic #1 in the Common Application
- □ I am applying to Honors and/or WISE and I am attaching my essay on topic #1 to this application

## SCHOLARS FOR MEDICINE/ENGINEERING SCHOLARS FOR MEDICINE/SCHOLARS FOR DENTAL MEDICINE ESSAY

An additional essay is required for applicants to Scholars for Medicine, Engineering Scholars for Medicine, and Scholars for Dental Medicine. Please write an essay about the topic below and attach it to this application:

## Paint a verbal portrait of an ideal physician (or dentist) and tell us about the experiences that you have had which have helped to shape this ideal.





Include check or money order for \$50 U.S. Dollars payable to: **Stony Brook University/Account #910554** (do *not* send cash)

Mail your Application, Application Fee, and all supporting documentation to:

Stony Brook University UG Processing 279 Broadway Albany, NY 12204-2755 U.S.A.