



# Cambridge College Application

Please PRINT CLEARLY and fill out COMPLETELY

## Application Date

month	day	year			

## Desired Entry Date

<input type="checkbox"/> Summer	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring		
Term			Year	

### For office use only

Date \_\_\_\_\_  
 Type of payment \_\_\_\_\_  
 Admission rep \_\_\_\_\_

## Academic program desired

Write program title \_\_\_\_\_

### Full time study

Undergraduate: 12 credits/term

Graduate: 8 credits/term

### Part time study

### Degree desired

- Bachelor's
- Master of Education
- Master of Management
- C.A.G.S.
- Ed.D.

### Non-degree study

- Undergraduate-level certificate
- Special student taking individual courses
- Graduate-level certificate (not C.A.G.S.)
- Post-master's licensure courses
- Other \_\_\_\_\_

### Cambridge or Regional Center

- Cambridge, MA
- Springfield, MA
- Lawrence, MA
- Augusta, GA
- Chesapeake, VA
- Ontario, CA
- Puerto Rico
- Other \_\_\_\_\_

## Personal & Contact Information

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Home phone (      ) \_\_\_\_\_ Maiden or former name \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Home e-mail \_\_\_\_\_ Cell phone (      ) \_\_\_\_\_

Birth date (optional) 

month	day	year			

Social Security Number (optional) 

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## For Our Statistics Please

(optional)

Your gender  Female  Male

Is English your primary language?

Yes  No (please specify below)

## Professional Work Experience Please attach current résumé

Present position (please be specific) \_\_\_\_\_

Your employer \_\_\_\_\_

Your work phone (      ) \_\_\_\_\_

Your work e-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Years of professional work experience 

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 Years at present position 

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### I would like to be identified as a member of the following group:

- Asian or Pacific Islander
- Native American
- Black, non-Hispanic
- White, non-Hispanic
- Hispanic
- Other/Unknown

## Citizenship ♦ Permanent Residence ♦ International Students

Country of citizenship:  U.S.  Other \_\_\_\_\_

Country of birth \_\_\_\_\_

I am a U.S. permanent resident. Photocopies of U.S. permanent resident card required (both sides). Number \_\_\_\_\_

I am NOT a U.S. citizen or U.S. permanent resident. Current U.S. visa type \_\_\_\_\_

**Please complete this application (2 pages) AND the international student information/ I-20 request form (next form).**

### How did you find out about Cambridge College?

Check all that apply:

- Subway or bus poster
- Newspaper ad
- Radio ad
- Mailed ad or brochure
- Friend or co-worker
- Cambridge College web site
- Other (please comment): \_\_\_\_\_

**Educational History** *Official transcript must be sent directly from the institution to Cambridge College.*

Undergraduate applicants: notarized high school diploma acceptable; official high school or college transcript preferred.

CAGS applicants: please list and provide official transcripts of both your bachelor's and master's degrees.

- High school diploma       Bachelor's degree       CAGS
- GED                               Master's degree               Other
- Associate's degree

Major/field of study \_\_\_\_\_

High School or College/university	location	dates (from/to)	degree completed
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College/university	location	dates (from/to)	degree completed
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**Undergraduate applicants:** Have you ever attended another college/university?  Full-time  Part-time  No

**Transcripts for Transfer Credit Evaluation** Please list all accredited colleges where you earned credits that you want evaluated for transfer, and request **official transcripts (must be sent directly from the institution to Cambridge College).**

College/university	location	dates (from/to)	credits earned
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College/university	location	dates (from/to)	credits earned
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College/university	location	dates (from/to)	credits earned
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Please note: total \_\_\_\_\_

International transcripts must be translated and evaluated by authorized agencies  Quarter-hours

Course descriptions or syllabi also required for transfer of required graduate courses  Semester-hours

**School of Education Applicants — Licensure/Certification You Hold**

Please enclose photocopy of your current educator license/teaching certificate

Are you a licensed/certified educator?  Yes  No

Number \_\_\_\_\_ State \_\_\_\_\_

If yes, in what area(s)? \_\_\_\_\_

Grade Level  Preliminary  Initial  Professional  Temporary  Other \_\_\_\_\_

**Read carefully and sign**

**Financial Aid** Are you applying for financial aid?  Yes  No If yes, please call the Financial Aid Office at 1-800-877-4723 ext. 1440. Students who have defaulted federal loans cannot receive government loans unless satisfactory arrangements have been made with the holder of the defaulted loan. Cambridge College verifies student information supplied on the financial aid application (FAFSA).

**I certify** that I have read and understand the information in this application booklet and that the information I have supplied is true and complete to the best of my knowledge. Students found to have supplied false information will be denied admission or, if admitted, face immediate disenrollment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Occasionally photos and videos are taken of classes and other College activities to show others what they are like. I hereby give Cambridge College permission to use such images of myself in College activities for public relations, marketing, and other purposes.

Signature \_\_\_\_\_

**Please enclose application fee and any copies required and mail to Cambridge or your regional center:**



**Cambridge College  
Office of Student Records  
1000 Massachusetts Avenue  
Cambridge, MA 02138**