

PRIORITY APPLICATION
for Hartwick Admission
Transfer Students

Tell us a
little about
yourself.



HARTWICK
COLLEGE
est. 1797

PO Box 4020 Oneonta
New York 13820
1-888-HARTWICK
fax: 607-431-4103
www.hartwick.edu
admissions@hartwick.edu

Personal Information

Regular Decision
Rolling admission

Name _____
Last/Family First/Given First Middle/Jr., etc.

Early Decision
November 1

Preferred Name _____ Gender Male Female

E-mail _____

Home Phone Number _____
Area/Country/City Code

Cell Phone Number _____
Area/Country/City Code

Permanent Home Address

Number, Street _____ Apt. Number _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Mailing Address (If different from above)

Number, Street _____ Apt. Number _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

1. You must submit your official college transcript to be admitted to Hartwick.
2. Only Nursing applicants are required to submit a personal statement. Letter(s) of recommendation are optional for all applicants.
3. You are not required to pay a fee to apply to Hartwick College.



Personal Information

Continued

Social Security Number _____ Date of Birth _____
Optional, unless applying for Federal financial aid *Month/Day/Year*

Citizenship US Dual US & _____ Other citizenship _____

US permanent resident (Alien Registration # _____)

I intend to apply for need-based financial aid Yes No

Have you ever been found responsible for a disciplinary violation at any education institution you have attended? Yes No

Have you ever been convicted of a misdemeanor, felony, or other crime? Yes No

If you answered yes to either of the last two questions, please attach a letter of explanation.

Parent/Guardian Information

Parents' Marital Status (relative to each other): Never married Married Widowed Separated Divorced

Parent/Guardian 1: Mother Father Unknown

Name _____
Last/Family First/Given Middle (Mr./Mrs./Ms.Dr.)

Employer _____ Occupation _____

Home or Work Phone _____ Cell Phone _____

E-mail Address _____

Parent/Guardian 2: Mother Father Unknown

Name _____
Last/Family First/Given Middle (Mr./Mrs./Ms.Dr.)

Employer _____ Occupation _____

Home or Work Phone _____ Cell Phone _____

E-mail Address _____

With whom do you make your permanent home?

Parent 1 Parent 2 Both Legal Guardian Ward of the Court/State Other

Hartwick relatives (name, class year and relationship to you):



Academic Information

Please send us your most recent college transcript as well as any additional college credit information you may have earned and an official copy of your high school transcript.

College you attend(ed) _____
(If you are not currently enrolled, please indicate the school from which you graduated.)

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Dates you attended college _____ Name of High School _____

Extracurricular interests/activities pursued during your college experience _____

Please choose your Academic Interest (s): Please indicate your first (☒) and second (☑) choice:

- | | | |
|---|--|---|
| <input type="checkbox"/> Accounting*• | <input type="checkbox"/> Individual Student Program* | Special Programs |
| <input type="checkbox"/> Anthropology | <input type="checkbox"/> Information Science* | <input type="checkbox"/> Pre-Allied Health |
| <input type="checkbox"/> Art | <input type="checkbox"/> Mathematics* | <input type="checkbox"/> Pre-Engineering |
| <input type="checkbox"/> Art History* | <input type="checkbox"/> Medical Technology | <input type="checkbox"/> Pre-Law |
| <input type="checkbox"/> Biochemistry | <input type="checkbox"/> Music | <input type="checkbox"/> Pre-Med |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Nursing*□ | <input type="checkbox"/> Education (certification)* |
| <input type="checkbox"/> Business Administration* | <input type="checkbox"/> Philosophy* | <input type="checkbox"/> Special Education (dual certification) |
| <input type="checkbox"/> Chemistry* | <input type="checkbox"/> Physics | |
| <input type="checkbox"/> Computer Science* | <input type="checkbox"/> Political Science* | <input type="checkbox"/> Please check here if you would like to be considered for a different major if not accepted into the Nursing program. |
| <input type="checkbox"/> Economics* | <input type="checkbox"/> Psychology* | |
| <input type="checkbox"/> English* | <input type="checkbox"/> Religious Studies* | |
| <input type="checkbox"/> Environmental Chemistry | <input type="checkbox"/> Sociology* | |
| <input type="checkbox"/> French* | <input type="checkbox"/> Spanish* | |
| <input type="checkbox"/> Geology & Environmental Science* | <input type="checkbox"/> Studio Art* | |
| <input type="checkbox"/> German* | <input type="checkbox"/> Theatre Arts* | |
| <input type="checkbox"/> History* | | |

* Eligible three-year degree programs
• General Accounting degree (CPA possible in 4 years)
□ Nursing applicants must provide test scores

Music students need to audition for admission. Art students need to submit portfolio for review.

Are you interested in Hartwick's three-year bachelor's degree program? Yes No

SAT/ACT option (please indicate if you would like to include your scores with your application): Yes No

Provide best score for each section of test: SAT _____ ACT _____
Math CR Writing Composite

College GPA _____



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

1. Are you Hispanic/Latino? Yes, Hispanic or Latino (including Spain) No

2. Regardless of your answer to the prior question, please select one or more of the following ethnicities that best describe you.

American Indian or Alaska Native (including all Original Peoples of the Americas) _____

Are you enrolled? Yes No If yes, please enter Tribal Enrollment Number

Asian (including Indian subcontinent and Philippines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

White (including Middle Eastern)



Signatures

Hartwick College does not discriminate on the basis of race, color, national or ethnic origin, religion, gender, sexual orientation, marital or parental status, veteran status, age, or handicap in its policies and procedures of admission, financial aid, instruction, athletics, employment, or other College-administered activities.

I certify that all information submitted in the admissions process – including this application and any other supporting materials – is my own work, factually true, and honestly presented. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation or expulsion, should the information I've certified be false. I authorize the release of my admission decision to my secondary school.

Signature _____ Date _____