



Antioch College
Office of Admissions and Financial Aid
795 Livermore Street
Yellow Springs, Ohio 45387

Telephone: (800) 543-9436
(937) 769-1100
Fax: (937) 769-1111
e-mail: admissions@antioch-college.edu
Home page: www.antioch-college.edu

Application for Admission

BIOGRAPHICAL INFORMATION

Legal Name _____
last first middle Jr., II, etc.

Like to be called (nickname) _____ e-mail address _____

Permanent home address _____
number & street apartment

city state zip telephone

Mailing address (if different from above) _____
number & street apartment

city state zip telephone valid until (date)

☐ male ☐ female Are you a U.S. citizen? ☐ yes ☐ no If not a U.S. citizen, permanent resident of U.S.? ☐ yes ☐ no

Birthplace _____ If no, what citizenship do you hold? _____

Birthdate _____ month day year Social Security No. _____

Any disclosure of ethnic background is completely voluntary and optional, and failure to identify your ethnic background will not subject you to any adverse action. Any disclosure of ethnic background will be kept confidential.

☐ Middle Eastern descent ☐ African descent ☐ Asian/Pacific Islander ☐ Caucasian ☐ Hispanic

☐ Multi-Racial ☐ Native American ☐ Other _____

Antioch College is committed to affirmative action and equal opportunity and does not discriminate on the basis of race, color, religion, national origin, sex, age, handicap, or sexual preference in its educational program, admissions, activities, and employment policies. The title IX and Section 504 coordinator is Dean of Student Life, Antioch College, 795 Livermore Street, Yellow Springs, OH 45387. (937-769-1161)

ACADEMIC PLANS

☐ New Student ☐ Fall (Sept.) Calendar year of desired entry _____

☐ Transfer Student ☐ Spring (Jan.)

☐ Early Action Request ☐ Summer (June)

Academic major/minor _____

Future career goal(s) _____

FINANCIAL AID

Do you plan to apply for financial aid? ☐ yes ☐ no

RECOMMENDED APPLICATION DEADLINE AND OPTIONS

To apply for admission, send your completed application to the Office of Admissions and Financial Aid by February 1. Candidates who apply after February 1 will be considered on a case-by-case basis. The early application deadline is Nov. 15; decisions will be mailed by Dec. 15. Candidate reply date is May 1. Enrollment deposits are non-refundable after April 30.

FAMILY INFORMATION

Please put information about your parent(s) or guardian(s) in the spaces below.

	Parent/Guardian I	Parent/Guardian II
Full name		
Relationship to you		
Permanent address and phone (if same as yours, write "same.")		
Occupation		
Employer		
College(s) and degree(s) (if any)		
Present health (if deceased, write year of death)		

If your parents are not married, please check one:

☐ divorced

☐ mother remarried

Do you have any children: ☐ yes

☐ no

☐ separated

☐ father remarried

If so, ages: _____

Brothers and/or sisters
(List eldest first)

☐ other

Note: Campus housing is not available for children.

Name	Age	Year in school	College (if any)
1. _____			
2. _____			
3. _____			
4. _____			

EDUCATIONAL EXPERIENCES

List all secondary schools you have attended. List most recent first.	City/State	Year of graduation
1. _____		
2. _____		
3. _____		

List all colleges at which you earned credit. List most recent first.	City/State	Degree	(month/year)
1. _____			
2. _____			
3. _____			

Have you ever been dismissed from any school or college? ☐ yes ☐ no

If "yes," please explain on a separate page.

COMMUNITY, VOLUNTEER AND EXTRACURRICULAR ACTIVITIES

Please list your principal extracurricular, community and personal activities in the order of their interest to you. Include any internships, social activism, or overseas travel. Please mark with an "X" in the right columns those activities you may pursue at Antioch. Use additional pages if necessary.

Activity	Approx. # of hours per week	Grade level or year of participation					Positions, letters, honors, awards, etc.	Are you considering participation while at Antioch?
		9	10	11	12	other		
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐
								Yes ☐ No ☐

Please list any of your work experiences including self-employment or work-based learning, such as apprenticeships or co-ops.

Job title or description	Place of employment	Hrs. per wk.	Dates of employment

ACADEMIC HONORS

List the names and dates of awards and/or honors you have received for academic excellence. (Examples: National Merit Scholarship semi-finalist or commended student, Governor's School, or AFS exchange.)

Award/Honor	Date(s) Received

Have you ever served in the military? ☐ yes ☐ no If so, were you honorably discharged? ☐ yes ☐ no

If you are not attending school or working at the present time, please describe on a separate sheet your activities since you were last in school.

Have you ever been convicted of a felony? ☐ yes ☐ no If "yes," please describe on a separate sheet. Be sure to include the date and precise nature of the felony as well as any mitigating circumstances. Disclosure of a conviction will not necessarily bar your application from further consideration.

BILLING INFORMATION

Please give full name, complete address, and telephone number of the person(s) to whom the costs of your education should be billed.

NOTE: The federal guidelines state that in order to be **independent** for purposes of applying for federal aid, you must: 1) be at least 24 years old; or 2) be a veteran; or 3) be an orphan or ward of the court; or 4) have dependents; or 5) be married. Antioch's policy is to follow the federal guidelines.

ANTIOCH CONNECTIONS

If any of your relatives or friends (other than any spouse) attend or have attended Antioch, please give their names, dates attended, and relationship to you.

Name	Dates	Relationship
Name	Dates	Relationship

ESSAYS

Your ability to communicate and your seriousness in doing so are two of the most important aspects of your application. We urge you to take sufficient time to develop reflective and thoughtful responses. **Please submit two typed, 2-5 page essays.** The first is required of all applicants; the second may be chosen from the options below.

Required essay topic: Drawing from your prior educational experiences, how do you see yourself adapting to the combination of co-op, classroom and community at Antioch? How does this educational philosophy match your learning style?

Optional essay topics:

- 1. A local, national or international issue which may be of great concern to you. Share your ideas and convictions on this issue.
- 2. Many experiences influence our lives and help us to understand ourselves—family experience, community experience, work experience, travel, or unusual events. Choose one of importance to you and explain how you were affected.
- 3. Select and submit one of the following: slides or photographs of your art work with detailed descriptions; a paper you wrote for a class preferably with teacher's comments; a description of an experiment in which you were involved; a report on some personal interest or involvement, or writing, (e.g., poetry, fiction or journals you have written).
- 4. Choose your topic.

NOTE: Actual craft work cannot be accepted. Slides and photographs should be clearly marked with your name and submitted in plastic photo sheets. Slides and photos can be returned upon request only if you provide a self-addressed stamped envelope. **NO VIDEO OR AUDIO TAPES WILL BE ACCEPTED.**

My signature below indicates that all of the information contained is complete and true to the best of my knowledge.

Applicant's signature _____ Date _____



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Application Instructions

The Application Process

1. Complete the Application for Admission form and return it to the Antioch College Office of Admissions and Financial Aid with the non-refundable \$35 application fee (check or money order only). Fee waivers may be granted to applicants for whom the fee would be a serious financial burden. To request a fee waiver, submit a substantiating letter from your school counselor or a copy of the Fee Waiver Request (College Board or ACT Assessment program).
2. Arrange for your transcript to be forwarded to the Admissions Office by your high school counselor or other person responsible for preparation of transcripts.
3. Arrange for official transcripts to be forwarded to the Admissions Office from each college or university at which you have enrolled in credit coursework.
4. Arrange for the Admissions Office to receive two letters of recommendation from counselors, teachers, principals, or employers. At least one reference should come from a person who is familiar with your academic work. References in addition to these two required references are optional, but recommended.
5. Arrange for the Admissions Office to receive a score report for the SAT and/or ACT test (optional, but recommended). Antioch's SAT code number is 1017; its ACT code number is 3232.
6. A personal interview is strongly recommended. Applicants are encouraged to visit the Antioch campus for the interview so that they have an opportunity to attend classes and visit with faculty and students. If this is not possible, applicants can contact the Office of Admissions and Financial Aid to have an interview in your area with an alumnus/a, faculty member, or admissions staff member.

Please note that, if the college needs additional information about an applicant in order to make an acceptance decision, personal interviews and/or test scores may be required.

The Admission Decision

In evaluating an applicant's qualifications and making an admission decision, Antioch College considers personal qualities such as involvement, independence, and self-direction as well as academic ability and/or potential. Consideration is given both to the applicant's ability to be successful in academics and to be an active participant in the Antioch community.

Antioch College does not discriminate in its admission decisions on the basis of race, color, religion, sex, sexual orientation, national origin, age, marital status, or disability

Recommended Application and Deadline Options

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Recommendation Instructions

RECOMMENDATION FOR ACADEMIC STUDY

Directions for Applicant

Read this form in its entirety and follow these instructions carefully to prevent the possibility of an additional reference requirement, which may slow your application process.

1. In the space below, fill in your name and the name, title, and telephone number of your chosen reference:

Applicant's Name			
	Last	First	Middle
Reference's Name			
	Last	First	Middle
	Title	Years Known	Phone

2. Under provisions of the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment), registered students have a right to see all recommendations submitted for admission, unless the student waives his/her right of access. Please indicate your preference by checking one of the following options and by signing and dating below.

☐ I have **retained** my right of access to this recommendation.

☐ I have **waived** my right of access to this recommendation.

Applicant's Signature

Date

If you waive your right of access, this letter will be destroyed upon enrollment. If you retain your right of access, the letter will be available in the Admissions Office for three months after your matriculation.

3. Please provide this form and a self-addressed envelope to each person providing a reference. You may make copies of this form or you may call the Admissions Office for additional forms.

Directions for Reference

1. Send this form and reference letter directly to Antioch College at the address listed above;

OR

2. Provide this form and reference letter in a sealed envelope to the Applicant for submission with the application materials.



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School Report Form

Student Name: _____

Student Address: _____

TO THE SECONDARY SCHOOL COLLEGE COUNSELOR

Attach the above mentioned applicant's official transcript, including courses in progress, a school profile, and transcript legend.

Please provide the following information for this candidate.

Class Rank _____ in a class of _____ covering a period from _____ to _____.

Rank is _____ weighted _____ unweighted.

High School Graduation Date _____

Cumulative G.P.A. _____ on a _____ scale.

G.P.A. is _____ weighted _____ unweighted.

Counselor's Name _____

Counselor's Signature _____

School _____ Position _____

Counselor's phone _____ FAX _____

High School CEEB Code _____

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 any forms such as this one.



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Dean's Reference

Supplementary Information for
Transfer Applicants Only

TO THE STUDENT

Please complete the section below and then have the Dean of Students at your most recent college or university complete and return this form. Your application for admissions will not be reviewed without this supplementary information.

Name _____
last first middle

Mailing Address _____
number and street apartment

city state zip code

Home Telephone _____ Date of Birth _____ / _____ / _____
area code/phone number month day year

Present or Most Recent Institution Attended _____

Dates Attended From _____ To _____ Degree Candidate? ☐yes ☐no

Other College or Universities Attended _____

I hereby give my permission for the release of my transcript and the other information requested on this form.

Signature of Applicant _____ Date _____

TO THE DEAN OF STUDENTS

The above student has applied for admission as a transfer student to Antioch College. Please complete this form and return it to: Office of Admissions, Antioch College, 795 Livermore Street, Yellow Springs, OH 45387. This information is not considered part of the student's educational record and will be destroyed after the admission evaluation process.

Is this student currently enrolled at your institution? ☐yes ☐no Is the candidate in good academic standing? ☐yes ☐no

If not, please explain _____

Please use this space for any additional comments about this student:

Please print your name _____

Title _____ Telephone Number _____

Signature _____ Date _____