

Application for One Term Only

University of Pittsburgh Johnstown

Office Use Only q Fee Paid

Personal Data

All data collected on the Application Form is private and confidential. The information collected will only be used internally, and will not be released to persons or institutions outside the University of Pittsburgh at Johnstown without your written consent.

1. **NAME** _____

Last Name
First
Middle
Social Security Number

2. If any of your records are under a name other than the one given above, please indicate.

Last Name
First
Middle

3. **PERMANENT ADDRESS**

Street
City
State
Zip
(Area Code)
Phone Number

4. **COUNTY OF RESIDENCE** Code Number _____ County _____

000 Outside PA	023 Cameron	047 Elk	071 Lancaster	095 Northampton	119 Union
001 Adams	025 Carbon	049 Erie	073 Lawrence	097 Northumberland	121 Venango
003 Allegheny	027 Centre	051 Fayette	075 Lebanon	099 Perry	123 Warren
005 Armstrong	029 Chester	053 Forest	077 Lehigh	101 Philadelphia	125 Washington
007 Beaver	031 Clarion	055 Franklin	079 Luzerne	103 Pike	127 Wayne
009 Bedford	033 Clearfield	057 Fulton	081 Lycoming	105 Potter	129 Westmoreland
011 Berks	035 Clarion	055 Greene	083 McKean	107 Schuylkill	131 Wyoming
013 Blair	037 Columbia	061 Huntington	085 Mercer	109 Snyder	133 York
015 Bradford	039 Crawford	063 Indiana	087 Mifflin	111 Somerset	
017 Bucks	041 Cumberland	065 Jefferson	089 Monroe	113 Sullivan	
019 Butler	043 Dauphin	067 Juniata	091 Montgomery	115 Susquehanna	
021 Cambria	045 Delaware	069 Lackawanna	093 Montour	117 Tioga	

5. **TEMPORARY MAILING ADDRESS** Until what date? _____ / _____ / _____

Month
Date
Year

Street
City
State
Zip
(Area Code)
Phone Number

6. **NAME OF FATHER/GUARDIAN** _____

Occupation
Employed by

7. **NAME OF MOTHER/GUARDIAN** _____

Occupation
Employed by

8. **FAMILY MEMBERS WHO ARE PITT ALUMNI** FATHER MOTHER BROTHER SISTER OTHER

9. **STUDENT CITIZENSHIP** U.S. CITIZEN U.S. IMMIGRANT/ALIEN PERMANENT RESIDENT REFUGEE
 NON-IMMIGRANT

Your response to questions 10-12 is voluntary, will be kept confidential and will not be used to deny access or admission. This information will, however, assist the University in providing data to demonstrate compliance with federal regulations.

10. **DATE OF BIRTH** _____ / _____ / _____ 11. **SEX** MALE FEMALE

Month
Day
Year

12. **RACE/ETHNIC GROUP** BLACK ASIAN/PACIFIC ISLANDER HISPANIC AMERICAN/ALASKAN NATIVE
 WHITE

Educational Background

13. PLEASE LIST THE NAME AND ADDRESS OF THE COLLEGE YOU ARE CURRENTLY ATTENDING.

Name	Address	City/State
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14. PLEASE INDICATE THE QUALITY POINT AVERAGE YOU CURRENTLY HAVE AT YOUR COLLEGE. _____

15. PLEASE LIST THE NAME AND ADDRESS OF THE HIGH SCHOOL YOU ATTENDED.

High School Name	Address	City/State
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Admissions Information

16. APPLYING FOR TERM BEGINNING FALL (SEPT.) SPRING (JANUARY) SUMMER (CIRCLE ONE) MAY OR JUNE

17. APPLYING FOR YEAR BEGINNING 20 _____

18. INDICATE YOUR CHOICE OF COURSE(S): Rank 1, 2, 3, etc.

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

19. PLEASE INDICATE WHY YOU WANT TO ATTEND PITT-JOHNSTOWN AS A ONE TERM ONLY STUDENT.

20. SIGNATURE

Signature of applicant

Date

*PLEASE INCLUDE A CHECK OR MONEY ORDER (DO NOT SEND CASH) FOR FORTY-FIVE DOLLARS (\$45.00) PAYABLE TO "UNIVERSITY OF PITTSBURGH." THIS IS A NON-REFUNDABLE APPLICATION FEE.

Please note that an official college transcript from your current institution must be provided before you will be permitted to attend class as a visiting student at the University of Pittsburgh at Johnstown. Additionally, a Letter of Agreement must be submitted from the Academic Dean at your college, stating that the course(s) at Pitt-Johnstown will be accepted for transfer.

Your Quality Point Average must be a 2.0 at your current institution. An interview with an Admissions Representative may be required in certain cases.
