**PERSONAL INFORMATION**

NAME (FIRST, MIDDLE, LAST, SUFFIX)

PREFERRED FIRST NAME

SEX ASSIGNED AT BIRTH: □ Male □ Female

DATE OF BIRTH

If you wish, you may elaborate on your gender identity.

HOME PHONE

CELL PHONE

EMAIL ADDRESS

SOCIAL SECURITY NUMBER (OPTIONAL)

U.S. ARMED FORCES STATUS: □ Currently Serving □ Previously Served □ Current Dependent □ Not Applicable

**PERMANENT ADDRESS**

STREET ADDRESS

APT. #

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

COUNTRY

**MAILING ADDRESS** *(if different from permanent address)*

Effective Dates of Mailing Address: From _____________ to _____________

STREET ADDRESS

APT. #

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

COUNTRY

**CITIZENSHIP**

Are you a U.S. citizen? □ Yes □ No

Are you a dual citizen? □ Yes □ No

Countries ____________________________ and ____________________________

If neither, then you are:

□ A U.S. permanent resident (specify alien registration number)

□ A U.S. visa holder (specify visa type)

□ Other (specify your country of citizenship)

Country of Birth _______________________________

Native Language (if not English) _______________________________

**ETHNICITY (OPTIONAL)**

Are you Hispanic or Latino? □ Yes □ No

Select one or more of the following races:

□ American Indian or Alaska Native □ Asian □ Black or African American

□ Native Hawaiian or Other Pacific Islander □ White
YOUR FAMILY

PARENT 1 – RELATIONSHIP
☐ Mother ☐ Father ☐ Legal Guardian ☐ Other
☐ Female ☐ Male  This person is: ☐ Living ☐ Deceased

TITLE: ☐ Dr. ☐ Miss ☐ Mr. ☐ Mrs. ☐ Ms. ☐ R. ☐ Rev.

FIRST NAME    LAST NAME

MAILING ADDRESS (IF DIFFERENT FROM YOURS)

CITY    STATE/PROVINCE    ZIP/POSTAL CODE

HOME PHONE    CELL PHONE

EMAIL ADDRESS

OCCUPATION    EMPLOYER

WORK PHONE

Did this person attend college? ☐ Yes ☐ No  If so:

COLLEGE(S)    DEGREE(S) EARNED

NAME OF PROFESSIONAL OR GRADUATE SCHOOL (IF ANY)

Please check if parents/guardians are  ☐ Married ☐ Separated ☐ Divorced (  ) ☐ Other

DATE

With which parent do you make your permanent residence? ☐ Both Parents ☐ Mother ☐ Father ☐ Legal Guardian

Have any of your relatives attended Rollins College? ☐ Yes ☐ No

NAME    RELATIONSHIP    DEGREE/YEAR

NAME    RELATIONSHIP    DEGREE/YEAR

Please list any brothers and/or sisters you have.

NAME    AGE

NAME    AGE

NAME    AGE

NAME    AGE
The submission of your SAT or ACT scores is optional. Rollins provides a Test Score Waived Option (TSWO), which focuses the application review on your individual academic achievement, creativity, and leadership instead of on standardized test scores. You can decide whether or not your test scores reflect your academic ability and potential.

Details on the TSWO can be found at [www.rollins.edu/admission/tswo](http://www.rollins.edu/admission/tswo).

Are you submitting SAT/ACT test scores for consideration? □ Yes, I will submit my test scores. □ No, I want to be considered for the TSWO.

**IF YES,** please give us your best score for each applicable category.

**SAT:** When did you take the SAT? □ Prior to March 2016 □ In or since March 2016

Critical Reading/Evidence-Based Reading and Writing Score _______ Math Score _______ Writing/Essay Score _______

**ACT:** Composite Score _______ TOEFL/IELTS: Score _______

Do you plan to take these tests in the future? If so, when? SAT _______ ACT _______

**ACADEMIC INFORMATION**

**CURRENT HIGH SCHOOL**

Type: □ Public □ Private □ Parochial □ Homeschool

**PREVIOUS HIGH SCHOOL (IF APPLICABLE)**

Type: □ Public □ Private □ Parochial □ Homeschool

**YOUR COUNSELOR INFORMATION**

**YOUR ACTIVITIES**

Please list your high school activities in order of their importance to you (sports, service projects, clubs, special interests, work experience, etc.). Feel free to attach a résumé if you wish.

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<th>ACTIVITY</th>
<th>POSITION(S) HELD</th>
<th>SCHOOL YEAR(S)</th>
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Have you engaged in community service beyond what is required by your school? □ Yes □ No

**ACADEMIC HONORS**

**POSSIBLE MAJOR INTEREST(S)**

**PERSONAL STATEMENT AND RÉSUMÉ**

We’d love to learn more about you than the basic facts on this application. Tell us, in 250 words or more, something special about you. The topic is your choice – be as creative as you like! If you’d like to send a résumé to us, please include it with your application.
ENROLLMENT PLANS

When do you plan to enroll?  □ Spring 2018 (Classes start in January)   □ Fall 2018 (Classes start in August)

You are applying for (select one):  □ Early Decision I (Nov. 1)   □ Early Decision II (Dec. 15)   □ Regular Decision (Feb. 1)
Note: Our priority scholarship deadlines are November 1 and January 5.

Have you previously applied to Rollins?  □ Yes   □ No

Are you applying for the 3/2 Accelerated Management Program?  □ Yes   □ No
This program combines a four-year Bachelor of Arts (BA) degree and a two-year Master of Business Administration (MBA) degree into a five-year program. Details can be found at www.rollins.edu/admission/amp.

Separate from need-based financial aid, which of the following programs are you interested in pursuing to help fund your education at Rollins?
□ Academic Scholarship (automatic consideration)
□ Alfond Scholarship (automatic consideration)
□ Athletic Scholarship (NCAA Division II)
□ Bonner Leader Scholarship (service-based)
□ Cram Scholarship (select science majors)
□ Florida Resident Scholarship (Bright Futures, FRAG, etc.)
□ Goings Scholarship (Boys & Girls Club members)
□ Nelson Scholarship (music majors)
□ Parker Scholarship (theatre majors)

FINANCIAL AID INFORMATION

The FAFSA: We encourage all students and their families to complete the Free Application for Federal Student Aid (FAFSA) regardless of income. Completing a FAFSA (our school code is 001515) and submitting it by the recommended December 1 deadline ensures that Rollins can consider you for all forms of need-based aid. Rollins offers need-based financial aid to international students. If you are an international student, a separate aid application will be sent to you. For more information, visit www.fafsa.ed.gov.

Do you intend to apply for financial aid?  □ Yes   □ No
REMEMBER …

- Check that your application is complete and all the information is correct.
- Submit your $50 application fee by check or money order.
- Send your official transcript(s) and test scores.
- Ask your counselor to submit a letter of recommendation and school report.

Applicants for admission are considered without regard to race, color, creed, age, gender, disability, sexual orientation or national origin.