

# APPLICATION PROCEDURES



Nyack, New York Campus

One South Boulevard • Nyack, NY 10960-3698

1-800-33-NYACK • Fax 845-358-3047

admissions@nyack.edu • www.nyack.edu



New York City Campus

335 Broadway/93 Worth Street • New York, NY 10013-3904

1-877-626-2236 • Fax 212-343-2668

admissions.nyc@nyack.edu • www.nyack.edu

## APPLICATION

Send your completed and signed application along with your non-refundable \$25 application fee to the appropriate address listed above.

## RECOMMENDATIONS

To be considered for admission, a pastor's recommendation must be completed and on record. Your pastor, youth pastor, elder or other spiritual leader should complete this recommendation (no family members). By completing the reference portion of the application, you give Nyack College permission to contact your reference for a recommendation. If submitted, additional recommendations from other sources will be reviewed. Providing a stamped envelope with the correct address when you request a recommendation will facilitate their prompt response.

## HIGH SCHOOL TRANSCRIPT AND TEST SCORES

High school graduation or its equivalent is essential for admission to Nyack College. Complete the top section of the Request for High School Transcript form and present it to your guidance counselor or school official. Official SAT or ACT scores are required for recent high school graduates. Scores listed on an official transcript are acceptable. Nyack College's ACT code number is 2846. The SAT Code is 2560.

## TRANSFER STUDENTS

We request that an official transcript from every college attended be sent directly to the Office of Admissions. Complete the College Transcript Request form and present it to your college Registrar's Office. If you have not received a college degree, you must also submit your final high school transcript. Please also submit a Transfer Recommendation to the Dean of Students at your most recent college.

## ATHLETES

Students interested in participating in Nyack College's varsity athletics must register with The NCAA Initial-Eligibility Clearinghouse ([www.ncaaclearinghouse.net](http://www.ncaaclearinghouse.net)) and complete the Nyack College Prospective Athlete Information form at [www.nyack.edu/psa](http://www.nyack.edu/psa). The Nyack Warriors athletic facilities, practices and events are located in Nyack, NY.

## INTERNATIONAL STUDENTS

Students for whom English is not their first language must be certified in English proficiency. Certification requires a minimum score of 550 on the paper-based test, 220 on the computer-based test or 83 on the internet-based TOEFL examination or students may demonstrate sufficient English proficiency through the CELT exam. A certified affidavit from an individual or agency guaranteeing financial support to the student for education in the United States is also required. After being accepted to Nyack, international students are required to make a deposit of \$2,000 before the Certificate of Eligibility I-20 form will be issued (\$100 processing fee included). The I-20 form is used to apply for the student visa (F-1). All international transcripts must be sent to World Education Services ([www.wes.org](http://www.wes.org)). WES will convert international transcripts to the US education system and send Nyack the results.

## IMMUNIZATIONS

Students must submit the Immunization Form prior to enrollment.

## GETTING ACCEPTED

After your completed application materials are received, you will be notified of your acceptance status. The Director of Admissions may require a personal interview or testing for placement purposes. *After your acceptance to Nyack:*

- Students attending the NYC campus will need to pre-register for classes.
- Students attending the Nyack, NY "residential" campus must submit a tuition deposit of \$100 before pre-registering for classes and applying for housing. The \$100 deposit for the Fall semester is refundable until May 1 of the enrollment year.
- Students must submit a Choice of Major form to be pre-registered for classes ([www.nyack.edu/fcs/apply](http://www.nyack.edu/fcs/apply)).
- The Health Services Office will contact you about health forms. This is different and separate from the Immunization Form that Admissions requires.
- A financial aid assessment will be made once you have completed your FAFSA.

## HOUSING (Rockland Residential Campus)

After you are accepted and submit a Tuition Deposit, you can apply for housing at [www.nyack.edu/content/NyackUGradHousing](http://www.nyack.edu/content/NyackUGradHousing). The Housing Application must be accompanied by a \$150 non-refundable Room Retainer Fee.

# HIGH SCHOOL TRANSCRIPT REQUEST



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Check here if you are applying to the **Nyack, New York Campus**

Check here if you are applying to the **New York City Campus**

## Student Information please print clearly

Please complete this section and present it to your high school guidance office.

NAME: FIRST, MIDDLE, LAST (MAIDEN)

ADDRESS

CITY, STATE, ZIP, COUNTRY

PHONE

E-MAIL ADDRESS

### Classification: (check all that apply)

- |                                       |                                    |                                   |  |
|---------------------------------------|------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> New Freshman | <input type="checkbox"/> Part-time | <input type="checkbox"/> Transfer | <input type="checkbox"/> Full-time       |
| <input type="checkbox"/> Re-Admission | <input type="checkbox"/> Resident  | <input type="checkbox"/> Commuter | <input type="checkbox"/> Student Athlete |

### Enrollment Date:

- Fall 20 \_\_\_\_\_  Spring 20 \_\_\_\_\_  Summer 20 \_\_\_\_\_

Dates attended high school \_\_\_\_\_  
MM/YY - MM/YY

I give permission for my official transcript and other information to be sent to Nyack College.

**Student's Signature:**

DATE

## Guidance Counselor please print clearly

Please give as much of the following information as possible:

- |  |   |
|--|---|
| <input type="checkbox"/> ACT Composite   | <input type="checkbox"/> High School Rank _____ out of _____                  |
| <input type="checkbox"/> SAT Verbal      | <input type="checkbox"/> Entered into NCAA Initial-Eligibility Clearinghouse? |
| <input type="checkbox"/> SAT Math        | <input type="checkbox"/> Yes <input type="checkbox"/> No                      |
| <input type="checkbox"/> High School GPA | <input type="checkbox"/> Other tests: _____                                   |
|  | Other tests: _____  |

This student graduated. Date of graduation \_\_\_\_\_  
MM/YY

**Guidance Counselor's Signature:**

DATE

Please mail this form with the applicant's official transcript to the appropriate address above, attention Office of Admissions.

# COLLEGE TRANSCRIPT REQUEST



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## **Student Information** please print clearly

Please complete this section and present it to your college Registrar's Office. Transfer students must request official transcripts for all institutions attended. Feel free to photocopy this form if necessary.

NAME: FIRST, MIDDLE, LAST (MAIDEN)

ADDRESS

CITY, STATE, ZIP, COUNTRY

PHONE

E-MAIL ADDRESS

### **Enrollment Date:**

Fall 20\_\_\_\_\_  Spring 20\_\_\_\_\_  Summer 20\_\_\_\_\_

Dates attended college \_\_\_\_\_  
MM/YY - MM/YY

Degree received: \_\_\_\_\_

I give permission for my official transcript and other information to be sent to Nyack College.

**Student's Signature:**

DATE

## **Registrar**

Please mail this form with the applicant's official transcript to the appropriate address above, attention Office of Admissions.

# TRANSFER RECOMMENDATION



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## Student Information please print clearly

Please complete this section and present this form to the Dean of Students or Director of Student Affairs of your most recent college attended.

NAME: FIRST, MIDDLE, LAST \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP, COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

### Enrollment Date:

Fall 20 \_\_\_\_\_  Spring 20 \_\_\_\_\_  Summer 20 \_\_\_\_\_

Name of College/University Attended \_\_\_\_\_ Dates Attended \_\_\_\_\_  
MM/YY - MM/YY

Reason for Transfer \_\_\_\_\_

I hereby authorize the release of the information requested below in order to be considered for admission.

**Student's Signature:** \_\_\_\_\_

DATE

I waive my right to review the comments below and realize that the information will be treated in strict confidence.

**Student's Signature:** \_\_\_\_\_

DATE

## To be completed by the Dean of Students or Director of Student Affairs please print clearly

Was the student subject to any disciplinary action at your institution?  Yes  No

If Yes, please describe action taken.

Is this student eligible for immediate readmission to your school?  Yes  No

Do you have any specific comments concerning the applicant's attitude toward authority, rules and other students?

### Signature of Dean of Students or Director of Student Affairs:

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

Please mail this form to the appropriate address above, attention Office of Admissions.

# PASTOR'S RECOMMENDATION



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## Student Information please print clearly

Please complete this section and present this form to a spiritual leader familiar with you from your home church (no relatives please).

### Enrollment Date:

Fall 20\_\_\_\_\_

Spring 20\_\_\_\_\_

Summer 20\_\_\_\_\_

NAME: FIRST, MIDDLE, LAST (MAIDEN)

ADDRESS

PHONE

CITY, STATE, ZIP, COUNTRY

E-MAIL ADDRESS

## Pastor's Information please print clearly

*NOTE: The above mentioned person has applied for admission to Nyack College. We are interested in your recommendation as one who knows the applicant well. Your response and utmost frankness to the following questions will be greatly appreciated. As of November 19, 1974, the Family Education Rights and Privacy Act, popularly known as the Buckley Amendment (Public Law 93-380), gives the right of access, review and challenge on the part of the student to any and all records held by the college on that student. In light of this, your reference will be destroyed following the admissions decision on this applicant. We, therefore, guarantee the confidentiality of your reference.*

NAME

POSITION IN CHURCH

RELATIONSHIP TO APPLICANT

NAME OF CHURCH

CHURCH MAILING ADDRESS

CITY, STATE, ZIP, COUNTRY

PHONE

E-MAIL ADDRESS

How long have you known the applicant? \_\_\_\_\_ years

How well do you know the applicant?

- by name and sight only
- casually
- a few personal contacts
- a number of personal contacts
- a close relationship

Is there anything about the student which may hinder his or her success in college?

\_\_\_\_\_

\_\_\_\_\_

Does the applicant have a positive attitude towards authority and instruction? If not, please explain.

\_\_\_\_\_

\_\_\_\_\_

To your knowledge, has the applicant made a personal commitment to Jesus Christ, and on what evidence do you base your conclusion?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list outstanding abilities the applicant may possess:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

continues on back

Please circle the word or words in the following list which, in your best judgement, characterize the applicant.

<b>LEADERSHIP</b>	NO OPPORTUNITY TO OBSERVE	MAKES NO EFFORT TO LEAD	TRIES BUT LACKS ABILITY	LEADS OCCASIONALLY	HAS SOME LEADERSHIP PROMISE	UNUSUAL ABILITY TO LEAD
<b>SOCIAL</b> <input type="checkbox"/>	NO OPPORTUNITY TO OBSERVE	AVOIDED	TOLERATED	ACCEPTED <input type="checkbox"/>	WELL-LIKED	SOUGHT OUT BY OTHERS
<b>JUDGMENT AND COMMON SENSE</b>	NO OPPORTUNITY TO OBSERVE	LACKS ABILITY	POOR JUDGMENT	FAIR JUDGMENT	SHOWS DISCERNMENT	DEMONSTRATES EXCELLENT FORESIGHT
<b>RESPECT FOR AUTHORITY</b>	NO OPPORTUNITY TO OBSERVE	DISRESPECTFUL	CRITICAL	RESPECTFUL	SHOWS RESPECT TO OTHERS	HONORS THOSE IN AUTHORITY
<b>RESPONSIBILITY</b>	NO OPPORTUNITY TO OBSERVE	NEEDS CONSTANT SUPERVISION	SUCCEEDS IF TOLD WHAT TO DO	DOES ORDINARY TASKS	RESOURCEFUL AND EFFECTIVE	SELF-RELIANT
<b>SPIRITUAL MOTIVATION</b>	NO OPPORTUNITY TO OBSERVE	MAKES NO PROFESSION	INCONSISTENT ATTITUDES & PRACTICES	NOMINAL	SHOWS GROWTH	GOOD MORAL AND SPIRITUAL STANDARDS
<b>MATURITY</b>	NO OPPORTUNITY TO OBSERVE	IMMATURE	DEPENDENT	AVERAGE	INDEPENDENT	VERY MATURE

On the basis of the foregoing, do you recommend this applicant for admission to Nyack College?

- highly recommend
- recommend
- recommend with reservations
- do not recommend

Please use the space below to write anything you think is important for Nyack College to know about the applicant:

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**Pastor's Signature:**

\_\_\_\_\_

DATE

Please mail this form to the appropriate address (found at the top of the front page), attention Office of Admissions.

# PROSPECTIVE STUDENT ATHLETE



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One South Boulevard • Nyack, NY 10960-3698

1-800-33-NYACK • Fax 845-353-2147

athletics1@nyack.edu • www.nyack.edu

Nyack's Intercollegiate Varsity Athletics is highly competitive. If you are interested in participating in varsity athletics (Nyack, NY campus only), please complete the online form at [www.nyack.edu/psa](http://www.nyack.edu/psa) and return this form with video tapes to the address at left, attention Athletic Department.

## Personal Information please print clearly

### Classification:

- New Freshman  
 Transfer (must complete transfer section below)  
 Re-Admission

NAME: FIRST, MIDDLE, LAST (MAIDEN)

### Gender:

- Male  
 Female

ADDRESS

CITY, STATE, ZIP, COUNTRY

PHONE

E-MAIL ADDRESS

### Enrollment Date:

- Fall 20 \_\_\_\_\_  
 Spring 20 \_\_\_\_\_

CELL

SOCIAL SECURITY #

## Athletic Information

Please check the sport(s) in which you would like to participate:

(note: these are NCAA II sports programs...you must be a qualifier to compete)

- Men's Soccer     Women's Soccer     Women's Volleyball     Men's and Women's Cross-Country  
 Men's Basketball     Women's Basketball     Golf     Softball     Baseball     Cheerleading  
Men's and Women's

### Prior Athletics Participation:

YEARS PLAYED

HEIGHT

WEIGHT

HEAD COACH

POSITION

TEAM RECORD

STATS

COACH'S PHONE

HIGH SCHOOL

SPECIAL HONORS

ADDRESS

OTHER SPORTS IN WHICH YOU PARTICIPATED

CITY, STATE, ZIP

## Academic Information

ACT SCORE OR SAT SCORE

CURRENT GPA

CLASS RANK

ACADEMIC HONORS

YEAR OF HS GRADUATION

INTENDED COLLEGE MAJOR

### Are you registered in The NCAA Initial-Eligibility Clearinghouse?

- Yes  
 No All student athletes must be registered in the NCAA Clearinghouse  
[www.ncaaclearinghouse.net](http://www.ncaaclearinghouse.net)

## Transfer Students please complete the following:

TERM / YEAR OF INITIAL FULL-TIME ENROLLMENT AT ANY INSTITUTION

NAME OF INSTITUTION

Have you participated in varsity athletics at any previous institution?

- Yes     No