

Gettysburg College

Gettysburg, Pennsylvania



Application for Admission for Fall Semester 20_____

APPLICATION CHECKLIST:

- Print or type both sides of the application. Sign and date it.
- Attach an essay (approximately 250 words) describing your reasons for wanting to participate in the Gettysburg Semester, your interest in the Civil War Era, and any relevant academic courses that you have taken in college.
- Enclose an official transcript.
- Submit one letter of recommendation from a professor in a signed, sealed envelope.
- Enclose the dean's recommendation form and request for confidential/open recommendation in a signed, sealed envelope.
- Include \$50 non-refundable application fee made payable to **Gettysburg College**.
- Mail completed application and all required materials to:

**Director
Gettysburg Semester
Campus Box 413
Gettysburg College
Gettysburg, PA 17325**

Name _____
(First) (Middle) (Last)

Date of Birth _____ Social Security No. _____

Citizenship _____ Sex _____

School Address _____
(Street or Box No.)

(City) (State) (Zip Code) (Valid Until)

(Telephone No.) (e-mail)

Permanent Address (if different from above) _____
(Street or Box No.)

(City) (State) (Zip Code) (Valid Until)

(Telephone No.) (e-mail)

THE GETTYSBURG SEMESTER

Current School Information

Home College or University _____

Present Academic Standing:

- First-Year
- Sophomore
- Junior
- Senior
- Other _____

Cumulative G.P.A. _____

Academic Major(s) _____

Academic Minor(s) _____

Are you/Have you ever been on academic probation?* Yes No

Are you/Have you ever been on disciplinary probation?* Yes No

**If you checked "yes" to either of the above questions, please feel free to add a paragraph to your essay explaining the circumstances.*

Learned of Gettysburg Semester program from:

- World Wide Web
- Faculty
- Gettysburg College Representative _____
- Friend
- Poster
- Literature
- Off-Campus Study Office
- Past Participant
- Newspaper/TV
- Other _____

Signature of Applicant _____

Date _____

THE GETTYSBURG SEMESTER

Professor's Recommendation Form

Name of Applicant _____

Social Security No. _____

To the Student: Please sign the authorization and give this recommendation form to a professor who knows you well and has taught you, preferably in your major. Your professor should forward the completed form to you in an envelope with his/her signature over the seal. Include this sealed envelope with your completed application packet.

I hereby authorize _____ to complete this form.

Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation and understand that the information provided will be used only for the purposes for which it was prepared.

- Yes
- No

Signature _____ Date _____

To the Professor: The individual named above has applied for admission to the Gettysburg Semester, a program designed to allow students from colleges and universities around the world to study the Civil War Era at Gettysburg College. We would appreciate your careful assessment of this student's intellectual ability and academic motivation, past performance, and maturity. After completing this form, please return it to the student in an envelope with your signature over the seal.

Student has taken which of your classes? _____

How long have you known the applicant? _____

Among all the students you have taught, how would you rate this applicant on a combined measure of academic performance and personal promise?

- Top 10%
- Upper 25%
- Upper 50%
- Lower 50%
- I recommend this student without reservation.
- I recommend this student with reservation.
- I do not recommend this student.

Please attach a brief letter of recommendation on a *separate sheet* and *return to the student* in an envelope with your signature over the seal.

THE GETTYSBURG SEMESTER

Dean's Recommendation Form

Name of Applicant _____

Social Security No. _____

To the Student: First sign and date **both** the authorization below and the Request for a Confidential/Open Recommendation form on the reverse side of this sheet. Then give this recommendation form to the Dean of Students at the college you are now attending or have attended most recently. The Dean should forward the completed form to you in an envelope with his/her signature over the seal. Include this sealed envelope with your completed application packet.

I hereby give my permission to the Dean of Students (or his/her designee) to complete this recommendation form, and to provide all personal and disciplinary information requested by Gettysburg College.

Signature _____ Date _____

To the Dean of Students: The individual named above has applied for admission to the Gettysburg Semester, a program designed to allow students from colleges and universities around the world to study the Civil War Era at Gettysburg College. We would appreciate your furnishing us with the following information, which will assist us in our evaluation process. Please attach additional pages if more space is necessary. *After completing this form, please return it to the student in an envelope with your signature over the seal.*

1. Dates enrolled at your institution: From _____ to _____
If attendance has been interrupted, please explain.
2. Is the candidate currently in good academic and social standing at your institution?
 Yes No If yes, please explain.
3. Do you have any conduct related concerns about this student that should be brought to our attention (including both social and academic conduct)?
 Yes No If yes, please explain.
4. Does this student have any special physical or emotional problems needs that should be brought to our attention?
 Yes No If yes, please explain.
5. Additional comments:

The above information is based on:

- Records and reports only
- Personal acquaintance
- Casual contacts
- Counseling contacts
- Other _____

To be completed by the dean/designee filling out this form:

Name _____

Signature _____

Position _____

Institution _____

Date _____

THE GETTYSBURG SEMESTER

Request for a Confidential/Open Recommendation

Dear Candidate:

Federal law enables you to have access to this recommendation in the future. Although you may waive this right, you cannot be required to do so by a school or person. If, despite the existence of this federal law, you wish to waive your right of access in expectation that it may produce a more candid evaluation, please sign statement A. If you choose not to waive your right of access to this recommendation, please sign statement B.

- A. I *waive* my right of access to this recommendation and authorize the author of this recommendation to provide an evaluation of me to the Gettysburg Semester program.

I understand it will be used only for its intended purpose and the recipient will not forward it to others without my written permission.

Signature _____ Date _____

- B. I *do not waive* my right of access to this recommendation, but authorize the author of this recommendation to provide an evaluation of me to the Gettysburg Semester program.

I understand it will be used only for its intended purpose and the recipient will not forward it to others without my written permission.

Signature _____ Date _____