



ASSUMPTION COLLEGE

WORCESTER, MASSACHUSETTS

Common Application Supplements

This document includes the following:

- First-Year application supplement ([pgs 2 – 3](#))
- Transfer application supplement ([pgs 4 – 5](#))



ASSUMPTION COLLEGE

WORCESTER, MASSACHUSETTS

Common Application First-Year Supplement

1.) Name: _____
Last First Middle

2.) Permanent Address: _____
Address line 1

Address line 2

City/Town State Zip

3.) How are you applying to Assumption College (check one)? Early Action (Nov. 1) Early Action II (Jan. 10) Regular Decision (Feb. 15)

4.) Have you previously applied for admission to Assumption College? Yes No

5.) Please indicate your area(s) of interest. 1: _____ 2: _____

Academic Programs:

- Accounting
- Biology
- Biotechnology and Molecular Biology
- Business
- Chemistry
- Classics
- Communications
- Computer Science
- Economics
- Economics *w/ Business concentration*
- Economics *w/ International concentration*
- Education concentration (*w/ appropriate major*)
- English *w/ concentration in literature*
- English *w/ concentration in Writing and Mass Communications*
- Environmental Science
- Foreign Languages
- French
- French *w/ concentration in Francophone Culture and Civilization*
- Global Studies
- Graphic Design
- History

- Human Services & Rehabilitation Studies
- International Business
- Italian Studies
- Latin American Studies
- Management
- Marketing
- Mathematics
- Music
- Organizational Communication
- Philosophy
- Political Science
- Psychology
- Sciences
- Sociology
- Sociology *w/ concentration in Criminology*
- Sociology *w/ concentration in Social Policy*
- Spanish
- Spanish *w/ concentration in Hispanic Culture and Civilization*
- Theology
- Visual Arts *w/ concentration in Art History*
- Visual Arts *w/ concentration in Studio Art*
- Undecided

Special Programs:

- Accounting(BA/MBA)
- Anthropology
- Community Service Learning
- Engineering
- Finance
- Geography
- Joint 7-year Program in Optometry
- Joint 7-year Program in Physical Therapy
- Joint 7-year Program in Podiatry
- Occupational Therapy concentration (*w/ appropriate major*)
- Peace and Conflict Studies
- Rehabilitation Counseling (6 in 5 Graduate Program)
- Special Education (BA/MA)
- Western Civilization (Fortin & Gonthier Foundations program)
- Women's Studies

Pre-Professional Programs:

- Pre-Law
- Pre-Medical/Pre-Dental

6.) Please list the names of any relatives who have attended Assumption College:

Name: _____ Year: _____ Relation: _____

Name: _____ Year: _____ Relation: _____

Name: _____ Year: _____ Relation: _____

7.) What influenced you the most to apply to Assumption College? Choose one: _____

- Alumna/us
- Assumption Athletic Coach
- Assumption Employee
- Assumption Representative
- Assumption Web site
- Brochure/Viewbook
- Campus Tour
- Current Assumption Student
- Fee Waiver
- Friend
- High School Athletic Coach
- High School Guidance Counselor/Advisor
- Interview
- Location
- Merit Scholarship Program
- Number of Undergraduate Students/Size of College
- Program of Study
- Relative
- Religious Affiliation
- Teacher
- Web Search
- Other

Please explain:

STANDARDIZED TEST INFORMATION

Assumption College is a test-score optional institution. Standardized test scores are not required. If you choose to submit your scores, the Assumption College codes are: SAT-I code: 3009; ACT code: 1782.

Please check only one: No (do not consider my test scores) Yes (consider my test scores)

Please forward to the Office of Admissions your \$50 application fee (if you have not paid via the Common Application Web site), official high school transcript, including your first quarter senior grades, and a letter of recommendation.

Mail to:

ASSUMPTION COLLEGE

Office of Admissions
500 Salisbury Street
Worcester, MA 01609-1296

Toll free: 866.477.7776
Telephone: 508.767.7285
Fax: 508.799.4412
www.assumption.edu



ASSUMPTION COLLEGE

WORCESTER, MASSACHUSETTS

Common Application Transfer Supplement

Each transfer applicant to Assumption must submit the Transfer Supplement in addition to the Common Application. ***Transfer applications will be considered incomplete without the supplement form.***

1.) Name: _____
Last First Middle

2.) Permanent Address: _____
Address line 1

Address line 2

City/Town State Zip

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Name: _____ Year: _____ Relation: _____

Name: _____ Year: _____ Relation: _____

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- | | | |
|---|--|--|
| <ul style="list-style-type: none">▪ Alumna/us▪ Assumption Athletic Coach▪ Assumption Employee▪ Assumption Representative▪ Assumption Web site▪ Brochure/Viewbook▪ Campus Tour▪ Current Assumption Student▪ Fee Waiver | <ul style="list-style-type: none">▪ Friend▪ High School Athletic Coach▪ High School Guidance Counselor/Advisor▪ Interview▪ Location▪ Merit Scholarship Program▪ Number of Undergraduate Students/Size of College | <ul style="list-style-type: none">▪ Program of Study▪ Relative▪ Religious Affiliation▪ Teacher▪ Web Search▪ Other |
|---|--|--|

Please explain:

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Please check only one: No (do not consider my test scores) Yes (consider my test scores)

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