Students for Fair Admissions, Inc. v. President and Fellows of Harvard College et al

Doc. 419 Att. 49



o 2015 The Common Application, Inc.

FIRST-YEAR APPLICATION

	ICANT	
Legal Name	First/Given Middle (complete)	Jr., etc.
Preferred name, if not first name (only one)	Former last name(s)	
Birth Date O Female O Male	US Social Security Number, if any	
тилаиуууу	Required for US Citizens and Permanent Residents applying for	financial aid via FAF
Preferred Telephone O Home O Mobile Home ()	Mobile ()	
E-mail Address	IM Address	
Permanent home address		
Number & Street	Aparlment #	
City/Town County or Parish	State/Province Country	ZIP/Postal Co
If different from above, please give your current mailing address for all admi	ission correspondence. (from	_ to
Ourselves Iller and descri	(mm/ad/yyyy)	
Current mailing address	Apariment #	
City/Town County or Parish	State/Province Country	ZIP/Postal Co
If your current mailing address is a boarding school, include name of school here:	· · · · · · · · · · · · · · · · · · ·	ZII II OSTAI GO
	E PLANS	
Entry Term: O Fall (Jul-Dec) O Spring (Jan-Jun) Decision Plan Academic Interests Career Interest	Do you intend to apply for need-based financial aid? Do you intend to apply for merit-based scholarships? Do you intend to be a full-time student? Do you intend to enroll in a degree program your first year? Do you intend to live in college housing? What is the highest degree you intend to earn?	○ Yes ○ No ○ Yes ○ No ○ Yes ○ No ○ Yes ○ No
		and a contract of the order
DEMOG	RAPHICS	
Citizenship Status	Are you Hispanic/Latino? Was Ulispanic or Latino (Instituting Spatia). O No. (Green Leave to	
Non-US Citizenship(s)	O Yes, Hispanic or Latino (including Spain) O No If yes, please de	schoe your backgroun
	E for our less and stream than the out of the state of th	da barra da di
Dellar	Regardless of your answer to the prior question, please indica yourself. (Check one or more and describe your background.)	te now you laenting
Birthplace City/Town State/Province Country	O American Indian or Alaska Native (including all Original Peoples of	of the Americas)
Years lived in the US? Years lived outside the US?	Are you Enrolled? O Yes O No If yes, please enter Tribal Enrollment Num	ber
Language Proficiency (Check all that apply.)		
S(Speak) R(Read) W(Write) F(First Language) H(Spoken at Home) SRWFH	O Asian (including Indian subcontinent and Philippines)	
0000	Block or African American (including Africa and Carlibbana)	
00000	O Black or African American (including Africa and Caribbean)	
00000	Mating Hausting or Other Beattis Islands (Original Beatles)	
Optional The Items with a gray background are optional. No information you provide will be used in a discriminatory manner.	O Native Hawaiian or Other Pacific Islander (Original Peoples)	La supres de ac
Rollglous Preference	O White (including Middle Eastern)	
US Armed Services veteran status		
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FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

below as well. If you wish, you may list step-par Household	ents and/or other adults with whom	n you reside, or who otherwise care for	you, in the Additional Informa	tion section.
Parents' marital status (relative to each other):	Never Married O Married O Civ	vil Union/Domestic Partners O Widowe	d O Separated O Divorced	d (date)
With whom do you make your permanent home if you have children, how many?	? O Parent 1 O Parent 2	○ Both ○ Legal Guardian ○ Wa	rd of the Court/State 🔾 0	ther mm/yyyy
Parent 1 ○ Mother ○ Father ○ Unknown Is Parent 1 living? ○ Yes ○ No (Date Dec	eased)	Parent 2 O Mother O Father O Unkr Is Parent 2 living? O Yes O No)
Last/Famlly/Sur First/Giv	en Middle	Last/Family/Sur	First/Given	Middle
Former last name(s)		Former last name(s)		
Country of birth		Country of birth		
Home address if different from yours	•	Home address if different from yo	ours	
Preferred Telephone: O Home O Mobile O Wo	irk () Area/Country/City Code	Preferred Telephone: O Home O	Mobile () Work () Area/Country/Cl	ty Cade
E-mail		E-mail		
Occupation		Occupation		
Employer		Employer		
College (if any)	CEEB	College (if any)		CEEB
Degree	Year	Degree		_ Year
Graduate School (if any)	CEEB	Graduate School (if any)		CEEB
Degree	Year	0		
Legal Guardian (if other than a parent)		Siblings		\$29.000.000.000 CA \$305.000.000.000.000.000
Relationship to you		Please give names and ages of you	ır hrothers or sisters. If they s	are enrolled in
		grades K-12 (or International equiv	alent), list their grade levels.	If they have
Last/Family/Sur First/Giv Country of birth	en Middie	attended or are currently attending institution, degree earned, and app three siblings, please list them in the	roximate dates of attendance	e. If more than
Home address if different from yours		Name	Age & Grade	Relationship
	***************************************	College Attended	·	CEEB
		Degree earned	Dates	
Preferred Telephone: O Home O Mobile O Wo	rk () Area/Country/City Code	or expected	mm	n/yyyy – mm/yyyy
E-mail		Name	Age & Grade	Relationship
Occupation		. College Attended		CEEB
Employer		Degree earned	Dates	n/yyyy — mm/yyyy
College (if any)	CEEB	or expected	na	- 7333 - anat 733 3
Degree	Year	Name	Age & Grade	Relationship
Graduate School (if any)	CEEB	College Attended		CEEB
Degree	Year	Degree earned or expected	Dates	n/yyyy — mm/yyyy

AP-2

City/Town Counselor's Nar E-mail List all other sec S Please list any c If your education Colleges & Us high school cam	mm/yyyy & Street condary school School Name & community pro	Is you have CEEB/AC'	re attended s T Code	Tesince 9 th t has prondicate s	grade, includir	Country/City Code ng academic su Location (City,	State/Pro Co Number mmer schoo State/Provi	vince unselor's Titl Fax Ext. ols or enrichn nce, ZIP/Post	CEEB/ACT e (Code Country City Code s hosted of	<i>Num</i> lon a secondar Dates At	y school campi tended (mm/yy
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Honors Briefly list any academic distinctions or honors you have received since the 9th grade or international equivalent (e.g., National Merit, Cum s(School) SA(State or Regional) N(National) (National)	Laude Society).
Grade level or Honor post-graduate (PG) 9 10 11 12 PG	Nighest Level of Recognition S S/R N I
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EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE Extracurricular Please list your principal extracurricular, volunteer, and work activities in their order of importance to you. Feel free to gradid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events instrument, employer, etc.). To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach	s, varsity letter, musical
Grade level or Approximate Villen did you participale post-graduate (PG) time spont in the activity?	lt applicable, do you plan
Summer/ Positions held, honors won, letters earned, or employer 9 10 11 12 PG Hours Weeks School School per week per year Break	to participate in college?
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AP-4

Instructions. The essay demonstrates your ability to write clearly and concisely on a selected topic and helps you distinguish yourself in your own voice. What do you want the readers of your application to know about you apart from courses, grades, and test scores? Choose the option that best helps you answer that question and write an essay of no more than 650 words, using the prompt to inspire and structure your response. Remember: 650 words is your limit, not your goal. Use the full range if you need it, but don't feel obligated to do so.

- Some students have a background, identity, interest, or talent that is so meaningful they believe their application would be incomplete without it. If this sounds like
 you, then please share your story.
- The lessons we take from failure can be fundamental to later success. Recount an incident or time when you experienced failure. How did it affect you, and what did you learn from the experience?
- Reflect on a time when you challenged a belief or idea. What prompted you to act? Would you make the same decision again?
- Describe a problem you've solved or a problem you'd like to solve. It can be an Intellectual challenge, a research query, an ethical dilemma-anything that is of
 personal importance, no matter the scale. Explain its significance to you and what steps you took or could be taken to identify a solution.
- Discuss an accomplishment or event, formal or informal, that marked your transition from childhood to adulthood within your culture, community, or family.

Disciplinary History

- ① Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution. Yes No
- ② Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Yes No [Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

Note: Applicants are expected to immediately notify the institutions to which they are applying should there be any changes to the information requested in this application, including disciplinary history.

SIGNATURE
Application Fee Payment If this college requires an application fee, how will you be paying it?
O Online Payment O Will Mail Payment O Online Fee Walver Request O Will Mail Fee Walver Request
Required Signature
I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have certified be false.
I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.
I affirm that I will send an enroliment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: Students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]
Signature Date

Common Application member institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.



SCHOOL REPORT

	TO THE	APPLICAI	٧T			
After completing all the relevant questions below, give this via mail, please also give that school official stamped enveloped in the completion of the comp					knows you better.	If applying O Female
Legal Name	***	pm) , 1 ph (Add Alle Consent Add	15-	— O Male
		First/Given	ID)	Middle (complete)	Jr., etc.	
Birth Date		PAID (COMMON A)	pp ID)			
Address						
Number & Street	Apartment #	City/Town		Itate/Province	Country	ZIP/Postal Code
School you now attend			_ CEEB/ACT C	ode		
Current year courses—please indicate title, level (AP, IB, classes taken in the same semester on the appropriate s	, advanced honors, e semester line.	tc.) and credit v	alue of all co	urses you are takin	g this year. Indica	te quarter
Full Year/First Semester/First Trimester	Second Semest	er/Second Trimes	ter		Third Trimester and term courses if mor	e space is needed
I further authorize the admission officers reviewing my apofficials at my current and former schools should they ha I understand that under the terms of the FERPA, after I mis submitted by me and on my behalf, unless at least one of 1. The institution does not save recommendations post-m 2. I waive my right to access below, regardless of the inst Yes, I do waive my right to access, and I understand I No, I do not waive my right to access, and I may some on my behalf to the institution at which I'm enrolling,	ve questions about the atriculate I will have a if the following is true; natriculation (see list a litution to which it is s will never see this for eday choose to see thi	e school forms so ceess to this form at www.commona ent: I'm or any other re is form or any oth	District on many and all other app.org/FERPA ecommendation of recommender recommender of the state of the sta	y behalf, recommendations a), ns submitted by me	nd supporting docu	iments
Required Signature 🥯					Date	
				State of the same of the same and the		
TO THE S Attach applicant's official transcript, including courses in prog complete your evaluation for this student. Be sure to sign b The Common Application offices.	ECONDARY ress, a school profile,	SCHOO and transcript leg	L COUN	SELOR anscript copies for rea	adability.) Use both	pages to
Counselor's Name (Mr./Mrs./Ms./Dr.)	Blanca maint on time					
Signature 🖏	Please print or type	9			Date	
olghature <u>va</u>						/dd/yyyy
Title		School				
School Address	Gity/Town	State/Pr	evince	Gountry	ZIP/Pos	tal Code
School Website Address						
Counselor's Telephone ()	E	Counselor') ntry/Cliy Gode	Number	
School CEEB/ACT Code	_ Counselor's E-mail .					
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Background Information

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he rank is O v	weighted O unweighted. How many a	dditional studer			lf.	school policy limits	the number a stu	dent may take in
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	lass				Ċ	most demanding		dolodion io.
	aduating class immediately attending:	fı	our-year	(mm/dd/yy)	titutions C	very demanding demanding average below average		
low long have yo	ou known this student and in what cont					Sand Men () Salt (Sin X		
hat are the first	t words that come to your mind to desc	ribe this student	?					
	ared to other students in his or her clas							One of the top
		Below		Good (above	Very good (well above	Excellent	Outstanding	few I've encountered
No basis	Academic achievement	average	Average	average)	average)	(top 10%)	(top 5%)	(top 1%)
	Extracurricular accomplishments							
AND CONTROL OF THE ARRANGE				100000000000000000000000000000000000000				
	Personal qualities and character							
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HARV00003568



TEACHER EVALUATION

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TO THE APPLICANT

After completing all the relevant questions below, give this form to a teacher who has taught you an **academic** subject (for example, English, foreign language, math, science, or social studies). **If applying via mail**, please also give that teacher stamped envelopes addressed to each institution that requires a Teacher Evaluation.

Legal Name				○ Femal
Last/Family/Sur (Ente	er name exactly as it appears on official documents.) First/Given	Middle (complete)	Jr., etc.
Birth Date	mm/dd/yyyy	CAID (Common App ID)		
Address				
Address	Apartment # City/Town	State/Province	Country	ZIP/Postal Code
School you now attend		CEEB	/ACT Code	
and all other recommendations 1, The institution does not save 2. You walve your right to acce Yes, I do walve my right to a No, I do not walve my right to	E: Under the terms of the Family Educational Ris s and supporting documents submitted by you be recommendations post-matriculation (see liss ss below, regardless of the institution to which incress, and I understand I will never see this for to access, and I may someday choose to see the ution at which I'm enrolling, if that institution st	and on your behalf, unless of at www.commonapp.org/ of it is sent: orm or any other recommer his form or any other recom	at least one of the following (FERPA). Indations submitted by me or Inmendations or supporting de	is true: on my behalf.
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 $\textbf{Ratings} \hspace{0.2cm} \textbf{Compared to other students in his or her class year, how do you rate this student in terms of:} \\$

No basis		Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few I've encoun- tered (top 1%)
	Academic achievement							
	Intellectual promise							
	Quality of writing		arred en on	Lucien	4-6		0.17 (0.14 (0.4 - 0.4	
	Creative, original thought							
	Productive class discussion						100	
	Respect accorded by faculty							
	Disciplined work habits							
	Maturity							
	Motivation							
	Leadership							
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	Reaction to setbacks							
	Concern for others		1011					
	Self-confidence							
	Initiative, independence						Andrews	
	OVERALL			<u></u>				

Evaluation Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others, (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)



MIDYEAR REPORT

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TO THE A	PPLICANT			
After completing the information in this section, give this form to your school cou please also give that school official stamped envelopes addressed to each institu	nselor or another schoo tion to which you have a	l official who knows you bette applied.		ail,) Femal
Legal Name	Cine I (Chron	Middle (complete)	C	
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ddress				
Number & Street Apartment #	City/Town	State/Province C	Country ZIP/P	ostal Coc
ichool you now attend	CEEB/	ACT Code		
IMPORTANT PRIVACY NOTE: In accordance with the Family Educational Rights reflects your choice to waive or not waive your right of access to all recommend including this one. You chose the following: O Yes, I do waive my right to access, and I understand I will never see this form No, I do not waive my right to access, and I may someday choose to see this on my behalf to the institution at which I'm enrolling, If that institution saves	ations and supporting do n or any other recommer form or any other recom	ocuments. That response appli- ndations submitted by me or or nmendations or supporting doc	es to all subsequent r n my behalf.	eports,
TO THE SCHOO	OL COUNSEL	OR		
Please submit this form when midyear grades are avallable (end of first semester on n progress and transcript legend. (Please check transcript copies for readability.) Bandmission office. Do not mail this form to The Common Application offices.	r second trimester). Atta e sure to sign below bo	ch applicant's official transcrip efore mailing directly to the	t, including courses college/university	
ounselor's Name (Mr./Mrs./Ms./Dr.)				
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chool Website Address				
ounselor's Telephone (Counselor's Fax (1		
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chool CEEB/ACT Code Counselor	's E-mail			
Background Information If any of the information below has changed for this he appropriate section below.	student since the School	l Report was submitted, pleaso	e enter the new inforn	nation i
Class Size Covering a period from to	Cumulative GPA:	on ascale, covering a p	period fromto) (mm/yyy)
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ave there been any changes in the applicant's disciplinary status at your school si Yes O No O School policy prevents me from responding				
o your knowledge, have there been any changes to the applicant's criminal history O Yes O No O School policy prevents me from responding	since you submitted the	original School Report?		
o you wish to update your original evaluation of this applicant? O Yes O No				
you responded yes to any of the preceding questions, please attach an expl	anation.			
Check here if you would prefer to discuss this applicant over the phon	e with each admissior	ı office.		
2013 The Common Application, Inc.				MR

OR



OPTIONAL GRADE REPORT

TO THE APPLICANT The Optional Grade Report may be used at any point in the academic year to submit updated grades to your colleges and universities, but it should not be used as a substitute for the Midyear or Final Report. After completing the information in this section, give this form to your school counselor or another school official who knows you better. If applying via mail, please also give that school official stamped envelopes addressed to each institution to which you have applied. O Female O Male Last/Family/Sur (Enter name exactly as it appears on official documents.) Middle (complete) First/Given CAID (Common App ID) Birth Date mm/dd/vvvv Address Number & Street Apartment # State/Province Country ZIP/Postal Code School you now attend CEEB/ACT Code IMPORTANT PRIVACY NOTE: In accordance with the Family Educational Rights and Privacy Act (FERPA), the original School Report submitted on your behalf reflects your choice to waive or not waive your right of access to all recommendations and supporting documents. That response applies to all subsequent reports, including this one. You chose the following: O Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf. O No, I do not waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate. TO THE SCHOOL COUNSELOR This form is not a substitute for the Midyear or Final Report. Please use this form only if you wish to update the applicant's grades at another point in the year. Attach the applicant's official transcript, including courses in progress and transcript legend. (Please check transcript copies for readability.) Be sure to sign below before mailing directly to the college/university admission office. Do not mail this form to The Common Application offices. Counselor's Name (Mr./Mrs./Ms./Dr.) _ Please print or type Signature Signature Date mm/dd/yyyy School Address ZIP/Postal Code Number & Street City/Town School Website Address Counselor's Telephone (_ Area/Country/City Code School CEEB/ACT Code Counselor's E-mail Background Information If any of the information below has changed for this student since the School Report was submitted, please enter the new information in the appropriate section below. _ Covering a period from _ scale, covering a period from Class Size (mm/yyyy) The rank is O weighted O unweighted. This GPA is O weighted O unweighted. The school's passing mark is How many additional students share this rank? Highest GPA in class __ O We do not rank. Instead, please indicate quartile This report is sent to convey: O First quarter/trimester senior grades O School Report/transcript correction O Other

Have there been any changes to the senior year courses listed on the original School Report? O Yes O No

Have there been any changes in the applicant's disciplinary status at your school since you submitted the original School Report?

○ Yes ○ No ○ School policy prevents me from responding

To your knowledge, have there been any changes to the applicant's criminal history since you submitted the original School Report?

O Yes O No O School policy prevents me from responding

Do you wish to update your original evaluation of this applicant? O Yes O No

If you responded yes to any of the preceding questions, please attach an explanation.

O Check here if you would prefer to discuss this applicant over the phone with each admission office. 2013 The Common Application, Inc.

OR-1



HOME SCHOOL SUPPLEMENT

HS

You may leave all school contact information (bottom of page 2) blank if you are stapling this Home School Supplement to the School Report before mailing. Please type or print in black ink. This form should only be used by home school supervisors. Check specific college information in our online Requirements Grid to ensure a member institution uses this form. *Do not mail this form to The Common Application offices.*

			TO THE A	PPLICANT				O Female
Legal Name	Last/Family/Sur	(Enter name exactly as	s it appears on official documents.)	First/Given	Middle	(complete)	Jr., etc.	_ O Male
Birth Date				Soci	al Security #			
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Address	Number & Street	Apartment #	City/Town	State/Province	Country	7	IP/Postal Code	
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Philosophy Please prov (e.g. educat	lde any informatio	on about the applicant motivation for home s	's home school experience and e chooling, instruction setting, etc.)	nvironment that you b i.	elieve would be help	ful to the reade	er	
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If the student has taken courses from a distance learning program, traditional secondary school, or institution of higher education, please list the course title and content, sponsoring institution, instruction setting and schedule, and frequency of interactions with instructors and fellow students (once per day, week, etc.). In addition, if the student has taken any standardized testing other than those listed on page 2 of the Common Application, please also describe below.

Transcript Subject	Course Title & Level (AP/College)	Date (To/From)	Grade	Primary Text Used
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Have there been any changes in the applicant's disciplinary status at your school since you submitted the original School Report? \bigcirc Yes \bigcirc No \bigcirc School policy prevents me from responding

To your knowledge, have there been any changes to the applicant's criminal history since you submitted the original School Report? ○ Yes ○ No ○ School policy prevents me from responding

Do you wish to update your original evaluation of this applicant? O Yes O No

If you responded yes to any of the preceding questions, please attach an explanation.

O Check here if you would prefer to discuss this applicant over the phone with each admission office.

≥ 2013 The Common Application, Inc.

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THE COMMON APPLICATION

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INTERNATIONAL SUPPLEMENT

You may leave all school contact information (at the bottom of this page) blank if you are stapling this International Supplement to the School Report before mailing to the college admission offices. Do not mail this form to The Common Application offices. Please type or print in black ink. Check specific college information in our online Requirements Grid to ensure a member institution uses this form. This form should only be completed by secondary schools using non-US educational systems. International schools using an AP curriculum exclusively need not complete this form.

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