## Pratt Institute School of Continuing and Professional Studies



## Application for Admission

### **GENERAL INFORMATION**

Last Name		First Name		Middle	
Number, Street					
City		State	Zip Code		
Daytime Telephone #		Evening Telephone #		Email Address	
Social Security #	Birth date (MM/DD/YY)	Birth	place (optional)		
PREFERRED MAILING	G ADDRESS (if differer	nt from above)			
Until what date is the preferred address valid? (MM/DD/YY)					
Number, Street					
City		State	Zip Code		
Telephone		Country			
APPLICATION INFOR	MATION				
Have you ever applied to Pratt bef	ore (undergraduate, graduate, certi	ficate)?			
If so, indicate date that you applied (MM/DD/YY)					
Desired entrance semester: Fall Spring Spring					
Which Certificate Program do you wish to apply for? Please check one.					
Digital Design Fashion New Media Creative Careers					
PERSONAL INFORMATION					
US Resident check one Yes No					
Country of Citizenship (permanent residents must submit a copy of their green card before an admissions decision can be made):					

information is entirely voluntary. It will not be used for admission, financial aid, employment or other purposes.			
What are your preferred pronouns?			
Prior Schools Attended (list recent): Name	Major	Degree/Certificate	
Link to Online Portfolio (optional)			
How did you hear about the Certificate F	Program in Fashion New Media	a, or Digital Design?	
Friend / Google Search / Other?			
What Do You Hope to Accomplish in the I	Program/What Are Your Goals?	2	

The following information will be used solely for reporting purposes as required of educational institutions by federal and state law. Providing this

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#### **EMERGENCY CONTACT INFORMATION: PERSON 1**

Pare	ent [	Guardian	Spouse	Other (Specify)			
Last Nam	пе				First Name		
Street							
City		State		Postal Code		Country	
Home Te	lephone		Daytime	Telephone		Occupation	
EMER Check or		Y CONTACT II	NFORMAT	TION: PERSON	2		
Pare	ent [	Guardian	Spouse	Other (Specify)			
Last Nan	ne				First Name		
Street							
City	State	Postal Code	Country				
Home Te	lephone	Daytime Telephone	Occupation	1			

# **ENGLISH PROFICIENCY** (For International Students only) **THREE-SEMESTER CERTIFICATE PROGRAM**

Citizen of a country where English is a nationally recognized language. (See list at right.)  A minimum TOEFL score of 500 paper-based test, 173 computer-based test or 61 internet-based test is required. (Attach documentation.)  If admission was based on another form of English Proficiency, then a TOEFL waiver form must be completed by an SCPS staff person.  Barbados Ba	national students must show evidence of English ciency through one of the following means.	
A minimum TOEFL score of 500 paper-based test, 173 computer-based test, of of Internet-based test is required. (Attach documentation.)  If admission was based on another form of English Proficiency, then a TOEFL waiver form must be completed by an SCPS staff person.  Bangladesh Barbados Barbuda Belize Bermuda Botswana Canada (except Quebec) Commonwealth Caribbean Dominica Fiji Ghana Grand Cayman Islands Grenada Guyana Irish Republic Jamaica Kenya Lesotho Liberia Malawi New Zealand Nigeria I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Date  Title  Antigua Australia Bahamas Bahrain Bangladesh Barbados Barbuda Belize Bermuda Botswana Canada (except Quebec) Commonwealth Caribbean Dominica Fiji Ghana Grand Cayman Islands Grenada Guyana Irish Republic Jamaica Kenya Lesotho Liberia Malawi New Zealand Nigeria I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Signature  Signature  Title  Title  Title  Title  Antigua Antigua Australia Bahamas Bahrain Bahra		
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Botswana Canada (except Quebec) Commonwealth Caribbean Dominica Fiji Ghana Grand Cayman Islands Grenada Guyana Irish Republic Jamaica Kenya Lesotho Liberia To be signed by the School of Continuing and Professional Studies. I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Signature Signatur	Proficiency, then a TOEFL waiver form must be	Bahamas Bahrain Bangladesh Barbados Barbuda
Ghana Grand Cayman Islands Grenada Guyana Irish Republic Jamaica Kenya Lesotho Liberia To be signed by the School of Continuing and Professional Studies. I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Signature Signature Signature Signature  To be signed by the School of Continuing and Papua New Guinea Sierra Leone Singapore South Africa (if Afrikaans is not native language St. Kitts and Nevis St. Lucia St. Vincent and Grenadines Swaziland Tanzania Tobago Trinidad Uganda United Kingdom Virgin Islands Zambia		Botswana Canada (except Quebec) Commonwealth Caribbean Dominica
Office Use Only  Description  To be signed by the School of Continuing and Professional Studies.  I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Signature  St. Vincent and Grenadines Swaziland Tanzania Tobago Trinidad Uganda United Kingdom Virgin Islands Zambia		Ghana Grand Cayman Islands Grenada Guyana
Professional Studies.  I have confirmed English Proficiency as a criterion for admission to the Certificate Program.  Signature  Signature  Name  Date  Title  New Zealand Nigeria Papua New Guinea Sierra Leone Singapore South Africa (if Afrikaans is not native language) St. Kitts and Nevis St. Lucia St. Vincent and Grenadines Swaziland Tanzania Tobago Trinidad Uganda United Kingdom Virgin Islands Zambia	Office Use Only	Jamaica Kenya Lesotho
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Signature  St. Kitts and Nevis St. Lucia St. Vincent and Grenadines Swaziland Tanzania Tobago Date Trinidad Uganda United Kingdom Virgin Islands Zambia		Papua New Guinea Sierra Leone Singapore
Name Swaziland Tanzania Tobago Date Trinidad Uganda United Kingdom Virgin Islands Zambia	Signature	St. Kitts and Nevis St. Lucia
Date  Trinidad  Uganda  United Kingdom  Virgin Islands  Zambia	Name	Swaziland Tanzania
Title Virgin Islands Zambia	Date	Trinidad Uganda
	Title	Virgin Islands Zambia