

# YOUR APPLICATION FOR ADMISSION

**Thank you for applying to Calvin!** This application will help us learn more about you and will help you understand Calvin's goals for your education.

Calvin is a Christian college with a Reformed accent. This means that **we believe God is sovereign over everything and that our world belongs to Him.** So, we courageously engage in all areas of academic study under the lordship of Jesus Christ and the authority of scripture, eager to know God more and serve Him better.

Calvin's mission is to shape hearts and minds for Christian living and learning, equipping students to follow and further the ways of God on earth. Join us!



**APPLY ONLINE**  
**CALVIN.EDU/APPLY**

## PERSONAL INFORMATION *Please use dark ink to complete form.*

Name: \_\_\_\_\_  
Last First Middle

Preferred name/nickname \_\_\_\_\_ Former/Other (please circle) \_\_\_\_\_

Home address: \_\_\_\_\_  
Number and Street Apartment Number

City State/Province Zip/Postal Code Country

Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_\_) \_\_\_\_\_

Gender: ☐ Male ☐ Female ☐ Checking this box indicates that you give Calvin permission to send occasional texts to this number.

E-mail address: \_\_\_\_\_ First language: \_\_\_\_\_

Mailing or temporary address — effective dates: from \_\_\_\_\_ to \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Birth place: \_\_\_\_\_  
Month Day Year City State/Province Country

Citizenship: ☐ U.S. Citizen ☐ U.S. Citizen Living Abroad ☐ U.S./Canadian Dual Citizen  
☐ Canadian Citizen ☐ Canadian Citizen Living Outside Canada - Immigration status: \_\_\_\_\_  
☐ Canadian Landed Immigrant (LPR) - Citizenship: \_\_\_\_\_  
☐ U.S. Lawful Permanent Resident (LPR) - Citizenship: \_\_\_\_\_  
Attach a copy of your LPR card.

## YOUR PLANS AT CALVIN

**TYPE OF ADMISSION:** ☐ First-time in college ☐ Transfer ☐ Dual/High school enrollment

**ENTRY DATE:** Year \_\_\_\_\_ ☐ Fall ☐ Spring ☐ Summer **CLASS LEVEL:** ☐ First-year ☐ Sophomore ☐ Junior ☐ Senior

**HOUSING:** ☐ In college housing ☐ At home ☐ Other (specify) \_\_\_\_\_

Please list in order of priority the areas of study you are considering: (If undecided, list that first.)

1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_

**HONORS PROGRAM:** Are you interested in being considered for The Calvin Honors Program? ☐ Yes ☐ No  
If yes, please apply at [www.calvin.edu/honors](http://www.calvin.edu/honors).

(A typical honors student has an ACT of 29, or SAT of 1290 or Canadian marks of 91%. Students with lower scores are also encouraged to apply.)

**NATIONAL MERIT:** Are you a National Merit Semifinalist or Finalist? ☐ Yes ☐ No

## YOUR EDUCATION

If you are not attending school at the present time, please submit a written explanation of what you are doing now.

High School: \_\_\_\_\_  
Name of High School City State/Province Country

If in high school, list your Grade 12 courses:

First semester: \_\_\_\_\_ Second semester: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your approximate GPA? \_\_\_\_\_ ☐ 4.0 scale ☐ \_\_\_\_\_ scale Year of graduation: \_\_\_\_\_

List any colleges you have attended: \_\_\_\_\_

Name of College Major/Program Dates of Attendance

Name of College Major/Program Dates of Attendance

Church: \_\_\_\_\_  
Name of Church City State/Province Country

Religious Affiliation Pastor Name Youth Pastor Name

## ENTRANCE TEST REQUIREMENTS *(optional for applicants age 21 and older)*

Calvin College requires test scores of all first-time applicants and of transfer applicants with less than two years of previous college credit. Please indicate when you have taken or plan to take the ACT and/or SAT.

ACT: \_\_\_\_\_ SAT: \_\_\_\_\_  
Month Year ACT Composite Score Month Year Critical Reading Score Math Score

## 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 or withdrawal from that institution? 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 convicted of a misdemeanor, felony or other crime? ☐ Yes ☐ No  
If you answered yes to either or both questions, please submit a written explanation with the following:
  - the approximate date of each incident
  - an explanation of the circumstances
  - your reflections on what you have learned from the experience

## OPTIONAL INFORMATION *(This information is important for our records, but will not be used in a discriminatory manner)*

1. Are you Hispanic/Latino or of Spanish origin? ☐ Yes ☐ No  
(a person of Cuban, Dominican, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)
2. From the following five racial groups, please select one or more races to describe your origins:
  - ☐ **American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
  - ☐ **Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
  - ☐ **Black or African American:** A person having origins in any of the black racial groups of Africa.
  - ☐ **Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
  - ☐ **White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
3. Marital status: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

## FAMILY INFORMATION *(optional for applicants age 21 and older)*

**MOTHER/STEPMOTHER:** Is she living? ☐ Yes ☐ No  
(circle one)

☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
(If different than yours) Number and Street

City State/Province Zip/Postal Code

E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Did she attend college? ☐ Yes ☐ No

Occupation: \_\_\_\_\_

☐ Business-owner ☐ Self-employed ☐ Farmer  
☐ Missionary ☐ Clergy (check all that apply)

Employer: \_\_\_\_\_

**FATHER / STEPFATHER:** Is he living? ☐ Yes ☐ No  
(circle one)

☐ Mr. ☐ Dr. ☐ Other \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
(If different than yours) Number and Street

City State/Province Zip/Postal Code

E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Did he attend college? ☐ Yes ☐ No

Occupation: \_\_\_\_\_

☐ Business-owner ☐ Self-employed ☐ Farmer  
☐ Missionary ☐ Clergy (check all that apply)

Employer: \_\_\_\_\_

Parents' marital status: ☐ married ☐ not married ☐ separated ☐ divorced ☐ widowed

Calvin College mailings to your parent(s) should be sent to:

☐ Both Parents ☐ Mother/Stepmother ☐ Father/Stepfather ☐ Other \_\_\_\_\_

**SIBLINGS:** Please provide names, ages, and education of all siblings who are 18 or younger.

Name	Age	School	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## COLLEGE PLANS AND ACTIVITIES

Please list all other colleges and universities to which you are applying (optional):

_____	_____
_____	_____

List the activities (i.e.: varsity sports, music groups, theatre, clubs, etc.) in which you expect to participate in college.

_____	_____
_____	_____

## YOUR ACTIVITIES, HONORS, LEADERSHIP ROLES AND DIVERSITY EXPERIENCES

List your activities, honors, leadership roles and diversity experiences in order of importance to you. You may also attach your resumé if you wish.

ACTIVITIES, HONORS, LEADERSHIP ROLES AND DIVERSITY EXPERIENCES	SCHOOL YEARS					TIME COMMITMENT
	9	10	11	12	other	
Participated on a team (i.e. debate, intramurals, etc.)		X	X			Aug.-Nov.
Secretary of National Honor Society			X			1 meeting/month
Worked on my neighborhood service project	X	X				1 week/summer
Lived in Ecuador for 6 months: attended a local church and school				X		Jan.-June 2011

## PERSONAL STATEMENT

Please submit a written response (250-500 words) to the following question.  
Your response will be used in scholarship and diversity award selection.

**Please describe how you will contribute to the academic, spiritual and community life at Calvin?**

## ACKNOWLEDGEMENT

Please read, check the appropriate boxes, sign and date below.

Calvin College strives to be a community that is graced by these characteristics:

- Learning that is imaginative, thought-provoking and guided by the Holy Spirit;
- Living together that is marked by the fruit of the Spirit: love, joy, peace, patience, kindness, goodness, faithfulness, gentleness and self-control (Galatians 5:22-23);
- Academic integrity that is central to honest scholarly work; and
- Personal integrity that reflects a faith-infused life of discipleship.

☐ I agree to support these commitments and to conduct myself in accordance with the principles and provisions of the Calvin College Student Conduct Code ([www.calvin.edu/go/student-conduct](http://www.calvin.edu/go/student-conduct)). If you are not able to agree, please explain on a separate sheet of paper.

☐ I understand that I may be subject to a range of disciplinary actions, including admission revocation, expulsion or revocation of course credit, grades and degree should the information I have certified to be false. I certify that all the information submitted in the application process is my own work, factually true and honestly represented, and that these documents will become the property of the institution and not returned to me.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Calvin College admits students of any race, color and national or ethnic origin.  
For Calvin College's guide to campus safety and substance abuse, please visit [calvin.edu/go/clery](http://calvin.edu/go/clery).*

**Please use dark ink to complete form.**

## FINAL STEPS:

1. Sign your application.
2. Give the transcript request to your school.
3. Give the academic recommendation form to a teacher.

### 4. SEND COMPLETED FORMS TO:

Admissions  
Calvin College  
3201 Burton Street SE  
Grand Rapids, MI 49546  
616-526-6106  
fax: 616-526-6777  
[admissions@calvin.edu](mailto:admissions@calvin.edu)

