

Application for Undergraduate Admission

You can also apply on-line or download further copies of this form from our website at www.internationalasa.com

We strongly advise you to submit your application by the following date

- 1 April for the Fall Semester

Late applications will be considered provided there is space available.

First Year applicants should apply as early as possible during their final year of secondary school.

You may apply on the basis of secondary school qualifications. If you are waiting for the results of final school examinations, we may be able to accept you provisionally on the strength of your application, your reference and your past academic record. However, we must receive your final results as soon as they become available.

All academic records must be original documents or certified copies. If they are not in English, they must be accompanied by an official English translation.

The Confidential Reference Form or Confidential Reference Letter must come from a teacher or guidance counselor at your academic institution, and it must be sent in a sealed and signed envelope.

All transfer students and visiting students with fewer than 30 credits or one year in a university level institution must send secondary school academic records, as well as their university transcripts.

To speed up the application process, you may fax your application and any supporting documentation to the Admissions Office and mail the originals. Any decisions based on faxed applications will be provisional until we have received the originals of all documents.

Keep a copy of your application form and any documents you send to the university.



Please type or print in black ink. Please answer all questions.

PERSONAL DETAILS

Legal Name

<input type="checkbox"/> Mr	First Name	Middle Name(s)	Nickname
Family Name(s)		Other names that might appear on your records	
Social Security Number (US citizens only)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Day Month Year	

CONTACT DETAILS

Mailing address (*for response to application*)

Street			
City	State/Province	Post Code	Country

Permanent address (*if different from above*)

Street			
City	State/Province	Post Code	Country

Telephone contact details

Home: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email (required):

ACADEMIC OBJECTIVE AT RICHMOND

Intended date of entry to Richmond <input type="checkbox"/> Fall (September)	Year of entry
---	---------------

I am a: First time university student Transfer student from another university

Have you previously applied to, or attended Richmond? Yes No (*Including Richmond International Summer School and programs in Florence or Rome*)

If yes, please give dates From: (dd/mm/yy) To: (dd/mm/yy) Richmond ID number (if known)

Have any of your family members attended Richmond?

PROPOSED PROGRAM OF STUDY AT RICHMOND

BA/BA (Hons)

Business Administration: International Business with Sports component

How did you first hear of the Academy?

- Advertisement Internet research Educational consultant
 Guidance counselor Representative visited my school/country Publication: _____
 Other (please specify):
Please give specific details:

EDUCATIONAL RECORD

Secondary School Education (*Start with the most recent*). Please give the complete address and phone numbers of the institutions.

If you have not yet taken or received the results on an examination, please give your current GPA or predicted results.

1. Name of Institution

Address				
City		Post Code		Country
Telephone: Country Code		City/Area Code		Number
Years Attended From: (dd/mm/yy) To: (dd/mm/yy)		Qualification awarded	Cumulative GPA (on a 4.0 scale)	Date of Award (dd/mm/yy)

2. Name of Institution

Address				
City		Post Code		Country
Telephone: Country Code		City/Area Code		Number
Years Attended From: (dd/mm/yy) To: (dd/mm/yy)		Qualification awarded	Cumulative GPA (on a 4.0 scale)	Date of Award (dd/mm/yy)

3. Name of Institution

Address				
City		Post Code		Country
Telephone: Country Code		City/Area Code		Number
Years Attended From: (dd/mm/yy) To: (dd/mm/yy)		Qualification awarded	Cumulative GPA (on a 4.0 scale)	Date of Award (dd/mm/yy)

College/University Education (*Start with the most recent*). Please give the complete address and phone numbers of the institutions.

If you have not yet taken or received the results on an examination, please give your current GPA or predicted results.

1. Name of Institution

Address				
City		Post Code		Country
Telephone: Country Code		City/Area Code		Number
Years Attended From: (dd/mm/yy) To: (dd/mm/yy)		Qualification awarded	Cumulative GPA (on a 4.0 scale)	Date of Award (dd/mm/yy)

2. Name of Institution

Address				
City		Post Code		Country
Telephone: Country Code		City/Area Code		Number
Years Attended From: (dd/mm/yy) To: (dd/mm/yy)		Qualification awarded	Cumulative GPA (on a 4.0 scale)	Date of Award (dd/mm/yy)

TEST SCORES

Please submit results of any of the following exams completed at the time of application.

SAT: Composite (optional)	Math	Reading	Writing	Date exam taken (dd/mm/yy)		
ACT: Composite (optional)	E	M	R	S	Writing	Date exam taken (dd/mm/yy)
AP: Subject	Grade	Date Exam taken (dd/mm/yy)				
IB <input type="checkbox"/> Diploma	<input type="checkbox"/> Certificate	Predicted IB Score	Date of Exams: (dd/mm/yy)			

ADDITIONAL INFORMATION

The following questions are a required part of the admissions process and must be answered.

What kind of activities are you involved with outside school e.g. societies, volunteering, sports, yearbook, etc?

What are your reasons for wanting to attend the Academy? How would you contribute to our community? Include here any additional information which might be of assistance to the Admissions Committee in evaluating your application.

If you are a transfer student, please give an explanation for your decision to transfer. If you have been out of full-time education for more than 6 months, please give details of your activities in this period and how these have prepared you for university study.

PARENTS AND GUARDIANS

Father or Male guardian's legal name *(check one box only)*

First name		Family Name	
Permanent address			
City/State/Province		Post code	Country
Telephone contact details			
Home: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email:
Occupation		Name of Company	
Business address			
City/State/Province		Post code	Country
Telephone contact details			
Work: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email:

Mother or Female guardian's legal name *(check one box only)*

First name		Family Name	
Permanent address			
City/State/Province		Post code	Country
Telephone contact details			
Home: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email:
Occupation		Name of Company	
Business address			
City/State/Province		Post code	Country
Telephone contact details			
Work: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email:

FINANCIAL DETAILS

Name and address of the person to whom financial statements should be sent

First name		Family name	
Address			
City/State/Province		Post code	Country
Telephone contact details			
Home: Country Code	City/Area	Number	Fax Number:
Mobile/Cell: Country Code	City/Area	Number	Email:

I understand that I must submit complete official transcripts from all schools, colleges, or universities attended. I certify that, to the best of my knowledge, all statements I have made in this application are complete and true. Incomplete or false information may result in the denial of this application or in my subsequent dismissal from Richmond, The American International University in London and the Academy.

Signature of applicant	Date
------------------------	------

APPLICATION CHECKLIST

- Make sure you have signed the Application Form.
- Send official transcripts or certified original copies of all secondary school and post-secondary work to date to the address below.
All documents in languages other than English must be accompanied by official translations.
- Include standardized test results, such as SAT, ACT, TOEFL or IELTS scores.
- Send the Confidential Academic Reference Form or a confidential reference letter completed by your teacher/guidance counselor, signed and sealed by them in an envelope. Alternatively, your teacher/guidance counselor can send it directly to the address below.
- Keep a copy of your application form and any documents you send to the university.
- Return your completed application to the Admissions Office.

Please address any questions to Mara Nisdeo at: mnisdeo@internationalasa.com

Documents can be scanned and emailed to: mnisdeo@internationalasa.com

All confidential materials can be mailed to:

Mara Nisdeo
IASA Richmond Program
171 West Ave.
Brockport, NY 14420

Richmond is an equal opportunity university. It does not discriminate in admissions, employment or access to programs. The policy of the University is that students, applicants or employment candidates are considered without regard to race, color, religion, sex, sexual orientation, national or ethnic origin, or age. The University complies with the UK Disability Discrimination Act.