



**NOTRE DAME  
OF MARYLAND  
UNIVERSITY**

# Women's College Application

A campus visit and interview are highly recommended for all prospective students prior to application.

*Early action deadline for first-year students:* December 1

*Deadline for transfer students (spring):* December 15

*Priority deadline for first-year students:* February 1

*Priority deadline for transfer students (fall):* March 15

Rolling admissions after that date on a space-available basis.

Please complete and mail with \$45 application fee to:

Office of Admissions  
Notre Dame of Maryland University  
4701 North Charles Street  
Baltimore, MD 21210-2404

Admissions Hotline: 410-532-5330

1-800-435-0200

Fax: 410-532-6287

E-mail: [admiss@ndm.edu](mailto:admiss@ndm.edu) • [www.ndm.edu](http://www.ndm.edu)

## I. AUTOBIOGRAPHICAL INFORMATION

Legal name \_\_\_\_\_  
Last First Middle Maiden name, if applicable

Prefer to be called \_\_\_\_\_ Social Security number \_\_\_\_\_

Permanent address \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_

Home telephone ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

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

Place of birth \_\_\_\_\_ Date of birth \_\_\_\_\_  
Month/Day/Year

Are you the first person in your family to attend college?  Yes  No

U.S. citizen  Yes  No Citizenship if other than the U.S. (country) \_\_\_\_\_

Are you a permanent resident of the U.S.?  Yes  No What is your U.S. visa status? \_\_\_\_\_

Will you need an I-20 (student visa) form?  Yes  No Do you possess a green card?  Yes  No

Is English your second language?  Yes  No

I understand this information is requested solely for the purpose of determining compliance with the Federal Civil Rights law and my response will not affect consideration of my application.

Are you Hispanic/Latina?  Yes  No

Race (you can choose one or more categories):

American Indian or Alaskan Native  Black or Non-Hispanic  Asian

Native Hawaiian or Other Pacific Islander  White

Religion \_\_\_\_\_

## II. APPLICATION STATUS

Fall semester \_\_\_\_\_  Spring semester \_\_\_\_\_  
Year Year

Please check **all** that apply to you:

First-year (first-time college student)  Early admission after junior year  Adult student (over 25 years of age)

Resident  Full-time  Transfer  Commuter  Part-time

I am interested in being considered for the Morrissy Honors Program. (Selection by invitation of Honors committee.)

I have visited the campus  Yes  No If yes, when \_\_\_\_\_  
 (First consideration for merit scholarships is given to students who have officially visited the campus.)

Name any other colleges or universities to which you have applied or plan to apply. \_\_\_\_\_

Over, please.

### III. TESTING

First-year applicants must take the SAT or ACT. Students should plan to take the SAT and/or ACT more than once since the highest scores will be used in the admissions process. If English is a second or foreign language, applicants must also take the TOEFL. Official scores should be sent directly from the appropriate testing agency to the University, but please self-report your test scores and dates taken/to be taken below.

SAT CEEB #5114

MM/YYYY Critical Reading Math Writing MM/YYYY Critical Reading Math Writing MM/YYYY Critical Reading Math Writing

ACT ACT #1727

MM/YYYY English Math Reading Science Composite Writing MM/YYYY English Math Reading Science Composite Writing

TOEFL CEEB #5114

MM/YYYY Test Score MM/YYYY Test Score MM/YYYY Test Score

### IV. PERSONAL DATA (Traditional-age students only)

My permanent home is with :  Both parents  Mother  Father  Other (please specify) \_\_\_\_\_

Check if parents are:  Separated  Widowed  Divorced

Name of legal guardian who claims you as a dependent with the IRS \_\_\_\_\_

#### MOTHER

Name \_\_\_\_\_ Living  Deceased

(Dr./Mrs./Ms.)

Position/title \_\_\_\_\_

Employer \_\_\_\_\_ Work telephone ( ) \_\_\_\_\_

Home address \_\_\_\_\_

(If different from yours)

Street

City

State

Zip

Please check highest level of education received:  High school diploma  College degree  Master's degree  
 Doctoral degree  Other \_\_\_\_\_

#### FATHER

Name \_\_\_\_\_ Living  Deceased

(Dr./Mr.)

Position/title \_\_\_\_\_

Employer \_\_\_\_\_ Work telephone ( ) \_\_\_\_\_

Home address \_\_\_\_\_

(If different from yours)

Street

City

State

Zip

Please check highest level of education received:  High school diploma  College degree  Master's degree  
 Doctoral degree  Other \_\_\_\_\_

Siblings: Number of sisters \_\_\_\_\_ Ages \_\_\_\_\_ Number of brothers \_\_\_\_\_ Ages \_\_\_\_\_

### V. ALUMNAE/FACULTY RELATIONSHIPS

I am related to a current student \_\_\_\_\_  
Name

Relationship \_\_\_\_\_ Class of \_\_\_\_\_

I am related to the following alumnae:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Class of \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Class of \_\_\_\_\_

I am related to a  current  former faculty/staff member \_\_\_\_\_  
Name

Relationship to faculty/staff member \_\_\_\_\_

**VI. SECONDARY SCHOOL INFORMATION**

Type of school from which you will (did) graduate:  Public  Independent  Private  Parochial/Catholic

School from which you will (did) graduate \_\_\_\_\_

Year of graduation \_\_\_\_\_ High school's College Board/ACT code number \_\_\_\_\_

Other secondary school(s) attended \_\_\_\_\_ Dates of attendance \_\_\_\_\_

\_\_\_\_\_ Dates of attendance \_\_\_\_\_

**First-year applicants:** Please list your senior courses, and indicate any Honors, Accelerated or Advanced Placement courses as 'Hon.', 'Acc.', or 'AP.' **Transfer applicants** should list courses which will be completed during the current academic year.

Fall \_\_\_\_\_ Spring \_\_\_\_\_

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

**VII. COLLEGE STUDIES** (for transfer students—please list all colleges attended)

College attended \_\_\_\_\_ CEEB# \_\_\_\_\_

City/State \_\_\_\_\_ Credits earned # \_\_\_\_\_

College attended \_\_\_\_\_ CEEB# \_\_\_\_\_

City/State \_\_\_\_\_ Credits earned # \_\_\_\_\_

College attended \_\_\_\_\_ CEEB# \_\_\_\_\_

City/State \_\_\_\_\_ Credits earned # \_\_\_\_\_

**Transfer students:** Reason for transfer \_\_\_\_\_

**VIII. MAJOR**

Please indicate which major fields you are considering. If undecided on a major, write "Undecided." \_\_\_\_\_

- |   |  |   |  |  |
|---|--|---|--|--|
| <input type="checkbox"/> Art                          | <input type="checkbox"/> International Business    | Dual Degree Major                                     | <b>Minors</b> are available in most programs of study. In addition, students may pursue minors in: |  |
| <input type="checkbox"/> Behavioral Neuroscience      | <input type="checkbox"/> International Studies     | (3–2 program)   |  |  |
| <input type="checkbox"/> Biology                      | <input type="checkbox"/> Liberal Arts              | <input type="checkbox"/> Engineering                  |  |  |
| <input type="checkbox"/> Business                     | <input type="checkbox"/> Marketing Communications  | Pre-Professional Programs                             |  |  |
| <input type="checkbox"/> Chemistry                    | <input type="checkbox"/> Mathematics               | <input type="checkbox"/> Dentistry                    |  | <input type="checkbox"/> Asian Studies             |
| <input type="checkbox"/> Classical Studies            | <input type="checkbox"/> Modern Foreign Languages  | <input type="checkbox"/> Law                          |  | <input type="checkbox"/> Catholic Studies          |
| <input type="checkbox"/> Communication Arts           | <input type="checkbox"/> Nursing                   | <input type="checkbox"/> Medicine                     |  | <input type="checkbox"/> Entrepreneurship          |
| <input type="checkbox"/> Computer Information Systems | <input type="checkbox"/> Philosophy                | <input type="checkbox"/> Pharmacy                     |  | <input type="checkbox"/> Latin American Studies    |
| <input type="checkbox"/> Criminology/Social Deviance  | <input type="checkbox"/> Physics                   | <input type="checkbox"/> Veterinary Medicine          |  | <input type="checkbox"/> Music                     |
| <input type="checkbox"/> Digital Media Arts           | <input type="checkbox"/> Political Science         | Certificate   |  | <input type="checkbox"/> Peace and Justice Studies |
| <input type="checkbox"/> Economics                    | <input type="checkbox"/> Psychology                | <input type="checkbox"/> Leadership and Social Change | <input type="checkbox"/> Sociology   |  |
| <input type="checkbox"/> Education                    | <input type="checkbox"/> Radiological Sciences     |   | <input type="checkbox"/> Women's Studies   |  |
| <input type="checkbox"/> Engineering                  | <input type="checkbox"/> Religious Studies         |   | <input type="checkbox"/> Writing   |  |
| <input type="checkbox"/> English                      | <input type="checkbox"/> Writing (as second major) |   |  |  |
| <input type="checkbox"/> Environmental Sustainability |  |   |  |  |
| <input type="checkbox"/> History                      |  |   |  |  |

## IX. STUDENT RÉSUMÉ

Please attach a separate sheet to this application listing the following (**this information is used to determine scholarship eligibility**):

A) High school or college co-curricular activities including years of participation. Categorize according to: special talents, organization, leadership positions, and/or academic honors.

B) Work or volunteer experience. Please summarize any paid or volunteer work experience. Include position/type of work, employer, paid or volunteer, and dates.

## X. HOW DID YOU FIRST HEAR ABOUT NOTRE DAME OF MARYLAND UNIVERSITY?

College fair  Internet  Radio  Relative  Mail (letter or brochure)  H.S. counselor  Friend  TV  Collegetown  
 Notre Dame admissions counselor visit  Alumna  Newspaper ad \_\_\_\_\_  Other \_\_\_\_\_  
Please specify Please specify

## XI. HONOR PLEDGE

I understand Notre Dame of Maryland University operates on an honor system and I affirm my intent of academic honesty. I certify that the information given in this application is correct to the best of my knowledge and belief.

\_\_\_\_\_  
Student signature

## XII. PARENT/GUARDIAN

I enclose the \$45 application fee which I understand is non-refundable.

\_\_\_\_\_  
Parent or guardian signature

Name and address of person to whom bill should be sent if other than parent(s)

\_\_\_\_\_  
Last First Middle  
Address \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

## XIII. ADMISSIONS ESSAY

As a liberal arts institution, Notre Dame of Maryland places great emphasis on a student's ability to develop and organize her thoughts in written form. This essay will serve as a sample of your writing ability as well as provide you with an opportunity to share your creativity and personality.

**Your essay, to be typed and attached to the application, should be:**

- well organized
- developed and supportive of a thesis
- approximately 300 words in length
- signed and dated to testify to the fact that all work on the essay, including the selection of subject matter, organization and writing, is entirely your own.

**Please select one of the following topics:**

1. What do you plan to study (major in) at Notre Dame of Maryland University, and why?
2. "Learn for Life" is a tagline expressing Notre Dame of Maryland University's approach to education. What does this phrase mean to you and how does it reflect your expectations as a college student?
3. Select two people who have been role models in your life and describe why.
4. If applying to the Morrissy Honors Program, please describe why you are interested in the program and how you would contribute to the program.

**International students in all categories:** All international students need to file the following documents: TOEFL scores (which can replace SAT scores for first-year students), a financial affidavit and recent bank statement, and English translations and evaluations of all transcripts.

**Reminder:** Some first-time students may enter Notre Dame with college credits through AP testing, International Baccalaureate (IB) courses or college courses taken as part of their senior year program. Classification as a transfer student is given to students who have completed a minimum of 12 credits at a two- or four-year college.

**Priority filing dates:** Scholarship awarding for first-time students will take place after the December 1 early action deadline and continue on a rolling basis. Priority consideration for scholarships is given to students whose applications are complete by the February 15 priority deadline. Transfer students should make every effort to meet the March 15 deadline for priority consideration.

*Notre Dame of Maryland University does not discriminate in its educational programs or activities or employment on the basis of race, color, age, sex, religion, national and ethnic origin, or handicap. For further inquiries, please contact the office of vice president for student development at 410-435-0100.*



NOTRE DAME  
OF MARYLAND  
UNIVERSITY

# Teacher/Counselor/ Advisor Assessment

This form is a required document for first-year admissions.

Please mail or fax directly to:

Office of Admissions  
Notre Dame of Maryland University  
4701 North Charles Street  
Baltimore, MD 21210-2404  
Fax: 410-532-6287  
E-mail: [admiss@ndm.edu](mailto:admiss@ndm.edu)

Notre Dame of Maryland operates on a rolling admissions basis and will evaluate a student's application as soon as it is completed.

## TO APPLICANT:

Fill in your name and address below and present this form to a teacher from an academic subject, counselor or advisor who has taught you within the last two years.

Name of applicant \_\_\_\_\_  
Last First Middle

Permanent address \_\_\_\_\_  
Street

\_\_\_\_\_ City State Zip Country

Applying for:      Fall       Spring       First-year       Transfer

I authorize my teacher, counselor or advisor to provide all requested information on this form.

Signature of applicant \_\_\_\_\_

## TO TEACHER/COUNSELOR/ADVISOR:

This form is a required document for first-year admissions. Please mail or fax directly to:

Office of Admissions, Notre Dame of Maryland University, 4701 North Charles Street, Baltimore, MD 21210-2404, Fax: 410-532-6287

Your candid evaluation of this applicant is of major importance in the Admissions Committee's decision. Please be advised that all information is kept confidential and removed from the applicant's folder before matriculation.

1. How long have you known the applicant? \_\_\_\_\_

2. In what capacity do you know the applicant? \_\_\_\_\_

3. How do you rate the applicant's motivation?

Excellent    Good    Fair    Poor

4. How do you rate the applicant's leadership potential?

Excellent    Good    Fair    Poor

5. How do you rate the applicant's ability to work with her peers?

Excellent    Good    Fair    Poor

6. Does the applicant work to her fullest potential?

Excellent    Good    Fair    Poor

7. Are there any special talents or interests that this student will bring to Notre Dame of Maryland? \_\_\_\_\_

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

*Over, please.*

8. Are there any honors or awards that should be brought to the attention of the Admissions Committee? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Comments:

10. I would:     Strongly recommend         Recommend         Prefer not to recommend        this student for admission.

Teacher/Counselor/Advisor's name \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

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

School/College \_\_\_\_\_

School/College address \_\_\_\_\_  
\_\_\_\_\_

# Request for High School Transcript

Notre Dame of Maryland University



NOTRE DAME  
OF MARYLAND  
UNIVERSITY

Please forward an official copy of my high school transcript to:

Notre Dame of Maryland University  
Office of Admissions  
4701 North Charles Street  
Baltimore, MD 21210-2404

Name \_\_\_\_\_ Maiden name (if applicable) \_\_\_\_\_

Social Security number \_\_\_\_\_ Date of birth \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Last school attended \_\_\_\_\_

Date of graduation or withdrawal \_\_\_\_\_

Thank you for your prompt attention to this request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please enclose a stamped envelope and send to your high school guidance office(s).*

# Request for College Transcript

Notre Dame of Maryland University



NOTRE DAME  
OF MARYLAND  
UNIVERSITY

Please forward an official copy of my college transcript to:

Notre Dame of Maryland University  
Office of Admissions  
4701 North Charles Street  
Baltimore, MD 21210-2404

Name \_\_\_\_\_ Maiden name (if applicable) \_\_\_\_\_

Social Security number \_\_\_\_\_ Date of birth \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Last school attended \_\_\_\_\_

Date of graduation or withdrawal \_\_\_\_\_

Thank you for your prompt attention to this request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please enclose a stamped envelope and send to your college(s).*

