



# APPLICATION FOR DOUGHERTY FAMILY COLLEGE



The faculty, staff and administration of the Dougherty Family College are pleased that you are interested in submitting an application for admission.

This application, along with your supporting documentation, is your opportunity to share information about yourself that you feel should be considered by the Admissions Committee. All documentation submitted will be confidential.

We welcome your online application at [stthomas.edu/dfc/applytoday](https://stthomas.edu/dfc/applytoday).

Please submit all materials to the Office of Admissions.

**Office of Admissions-DFC**  
Mail 5017  
2115 Summit Ave.  
St. Paul, MN 55105-1096

(651) 962-6150 or  
(800) 328-6819, Ext. 2-6150  
DFC@stthomas.edu  
[stthomas.edu/dfc](https://stthomas.edu/dfc)

## A COMPLETE APPLICATION INCLUDES

Application for Admission	Official High School Transcript*	FAFSA or Dream Act application	Writing Essays	Recommendation Letters <i>(recommended)</i>
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**\*Note: Official transcripts must be sent directly from the school to St. Thomas.**

## ENROLLMENT INFORMATION

Application for:  Fall Year: 20\_\_\_\_\_

## APPLICANT INFORMATION

Name \_\_\_\_\_  
Last First Middle Preferred first name Previous/former

Permanent address \_\_\_\_\_  
Street address Apt. No. City State ZIP

Sex:  Male  Female Date of birth \_\_\_\_\_ Social Security No. \_\_\_\_\_  
MM/DD/YY

Current address \_\_\_\_\_  
(if different from permanent) Street address Apt. No. City State ZIP

Email address \_\_\_\_\_

Student cellphone number\* (\_\_\_\_\_) \_\_\_\_\_ International phone number \_\_\_\_\_  
Area code Phone number (if applicable) Country code Phone number

\*Are you willing to receive text messages from the admissions office at St. Thomas?  Yes  No  
(You will receive no more than three messages per month. Users can text STOP to unsubscribe at any time. Message and data rates may apply.)

Contact phone number (if different than your cellphone) \_\_\_\_\_

Please indicate if this number is:  Home (landline)  Cell (not yours) \_\_\_\_\_  
If not your cellphone, provide name of person

Citizenship:  U.S. citizen  Permanent resident  International student  Asylee/refugee  Other

Country of citizenship (if not U.S.) \_\_\_\_\_

Have you ever served in the United States Armed Forces?  Yes  No

Eligible for veterans benefits:  Yes  No

Activities: Clubs, intramurals and activities that may be of interest to you at St. Thomas

Religious preference (optional) \_\_\_\_\_

T-shirt size \_\_\_\_\_

## ETHNICITY AND RACE (Optional) CHECK ALL THAT APPLY

**Are you Hispanic or Latino?** A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish origin, regardless of race.  Yes  No

**Black or African-American:** A person having origins in any of the black racial groups of Africa.

**American Indian or Alaska Native:** A person having origins in any of the original peoples of North or South America (including Central America), and who maintains a tribal affiliation or community attachment.

**Native Hawaiian or other Pacific Islander:** A person having origins in any of the original people of Hawaii, Guam, Samoa or other Pacific Islands.

**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.

**White:** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

**Prefer not to respond**

## ACADEMIC INFORMATION

You must submit an official transcript from your high school and **ALL post-secondary** institutions attended.

High school \_\_\_\_\_  
Name City State

Graduation date \_\_\_\_\_ GED:  Yes  No Date \_\_\_\_\_

High school, community, and church activities and honors \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Required for all students who have earned college credits:

List **ALL** post-secondary institutions attended and submit an official transcript from each.

**1** \_\_\_\_\_ **2** \_\_\_\_\_  
College name City, State Dates attended College name City, State Dates attended

**3** \_\_\_\_\_ **4** \_\_\_\_\_  
College name City, State Dates attended College name City, State Dates attended

### List high school and college courses for which you will receive academic credit this year (2016-17):

Term 1/semester 1	Term 2/semester 2	Term 3	Term 4
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## WRITING ESSAYS

Prepare 150- to 250-word essay responses for each of the following three topics. These can be emailed or mailed:

**DFC@stthomas.edu** or **Office of Admissions-DFC**

Mail 5017  
2115 Summit Ave.  
St. Paul, MN 55105-1096

### Topics:

1. Why do you believe you are ready for college at this time? (150-250 words)
2. What experiences have prepared you to succeed in college? (150-250 words)
3. How would completing a college education help you achieve your personal and professional goals? (150-250 words)

### Did you learn about St. Thomas from any of the following sources or individuals? CHECK ALL THAT APPLY

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Friend/relative      | <input type="checkbox"/> High school counselor/teacher | <input type="checkbox"/> Community-based organizations/<br>college access group _____ |
| <input type="checkbox"/> St. Thomas alumnus/a | <input type="checkbox"/> Independent college counselor | <input type="checkbox"/> Other _____  |

## FAMILY INFORMATION

Parent's/guardian's name (or spouse if applicable)

Parent's/guardian's name (or spouse if applicable)

Home address

Home address

City, State, ZIP

City, State, ZIP

Employer

Employer

Occupation/title

Occupation/title

Cellphone

Cellphone

Parent's/guardian's email (or spouse if applicable)

Parent's/guardian's email (or spouse if applicable)

List names and ages of your brothers and sisters and the schools they currently attend. Please indicate if any are your twin/triplet, etc.

List relatives, in addition to brothers and sisters already listed, who have attended or who currently are attending St. Thomas and their relationship to you \_\_\_\_\_

## STUDENT STATEMENT

I certify that the information I have provided on this application and all other admission materials is complete, accurate and true to the best of my knowledge.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

The University of St. Thomas is an equal opportunity educator and employer. St. Thomas does not unlawfully discriminate, in any of its programs or activities, on the basis of race, color, creed, religion, national origin, sex, sexual orientation, family status, disability, age, marital status, status with regard to public assistance, membership or activity in a local commission, genetic information or any other characteristic protected by applicable law. [stthomas.edu/eostatement](http://stthomas.edu/eostatement)

The University of St. Thomas is registered with the Minnesota Office of Higher Education pursuant to sections 136A.61 to 136A.71. Registration is not an endorsement of the institution. Credits earned at the institution may not transfer to all other institutions.