

LIU-Post

On-Site Admission Day

Monday, November 18, 2024

To be eligible for the on-site admission day you must submit your online application and return the attached transcript request form to your Guidance Counselor by Tuesday, November 12, 2024.

Application Criteria to be met:

- GPA: 82+ (85 for Nursing and Vet Tech Students)
 - All students applying above 82 GPA, apply test optional
- GPA 80-81, students can be admitted with a 1050+ SAT or 20+ ACT
 - 80-81, no test scores, will be waitlisted
- Transcript is required, but essay and letters of recommendation are supplemental for the on-site.
- Online application must be submitted by November 12, 2024, to be scheduled to meet with the on-site representative. The application can be completed on the LIU website or through the common application. **The fee waiver code is LIU25.**

**RETURN THE ATTACHED
TRANSCRIPT REQUEST FORM BY
Tuesday, November 12, 2024.**

TRANSCRIPT REQUEST FORM

Pg. _____ of _____

PLEASE CIRCLE ONE:

COLLEGE APPLICATION

SCHOLARSHIP APPLICATION

Directions: 1. Print all information clearly

2. Fill out one (1) form for each college or scholarship

Please note: This request may take up to 10 School Days to be processed

Deadline: _____
For Office Use Only

Student Name: _____

Student ID#: _____

I request that the following information be sent to the college or scholarship named below:
(INDICATE THE INFORMATION REQUESTED BY CHECKING THE APPROPRIATE LINES)

Are you using the Common Application?

Yes _____

No _____

 X Transcript

_____ Counselor Letter of Recommendation

 X Teacher Letter of Recommendation and/or Evaluation

Teacher's Name _____

_____ Teacher Letter of Recommendation and/or Evaluation

Teacher's Name _____

 X SAT/ACT SCORES
(Attached)

SATs _____
FILL IN DATE

ACTs _____
FILL IN DATE

PLEASE SEND THE ABOVE INFORMATION TO:

NAME OF COLLEGE/SCHOLARSHIP: LIU - C.W. POST ON-SITE ADMISSIONS

ADDRESS: _____

CITY, STATE & ZIP: _____

 X TUESDAY, NOVEMBER 12, 2024

Date of Request

Deadline

 X _____

Student Signature

 X _____

Parent/Guardian Signature

FOR OFFICE USE ONLY:

Received by: _____ Counselor Name: _____ Date eDocs or Mailed: _____