



On-Site Admissions Day

Thursday December 19, 2024

To be eligible for the on-site admissions day, you must submit your application and return the attached transcript request form to the Guidance Office by the end of the school day on December 17, 2024

Application fee waiver code for On-Site applicants: SJUNIVERSITY

To be considered, the following criteria must be met:

- Must have applied through <https://www.sjny.edu/applynow> or the Common App
- GPA around the mid-80s
- Test optional. A lower GPA might require exam scores. Bring a printed copy from your college board account (Required score if needed to provide is 1100 SAT and 21 ACT)
- Nursing applicants welcome, but applications will be brought back for review, not given admissions on the spot
- Must have a letter of recommendation, college essay, activity list/resume

Please stop by the Guidance Office if you have any questions.

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 _____

☒ Transcript

_____ Counselor Letter of Recommendation

☒ Teacher Letter of Recommendation and/or Evaluation

Teacher's Name _____

_____ Teacher Letter of Recommendation and/or Evaluation

Teacher's Name _____

☒ SAT/ACT SCORES
(Attached)

SATs _____
FILL IN DATE

ACTs _____
FILL IN DATE

PLEASE SEND THE ABOVE INFORMATION TO:

NAME OF COLLEGE/SCHOLARSHIP: ST. JOSEPH'S UNIVERSITY - ON-SITE

ADDRESS: _____

CITY, STATE & ZIP: _____

☒

TUESDAY, DECEMBER 17, 2024

Date of Request

Deadline

☒

Student Signature

☒

Parent/Guardian Signature

FOR OFFICE USE ONLY:

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