The Post-Baccalaureate Program has rolling admissions. The Department welcomes applications between Dec. 1 and April 15 for admission in the following fall. You will be notified of the department’s decision about one month after we have received your application. Students who wish to apply to the program should submit the following materials:

1. A completed application to the Post-Baccalaureate Program.

2. Official transcripts from all colleges or universities you have attended, with date of actual or expected degree(s) clearly indicated.

3. Two letters of recommendation from college or university instructors familiar with your work. Letters addressing your experience with Latin and/or ancient Greek would be most welcome. These letters should be sealed separately in envelopes with the signature of the recommender across the back flap, or they may be sent directly to the director of the program by email.

4. A personal statement, not more than two double-spaced pages, explaining your prior experience with Greek and Latin and an explanation of how this program will meet your professional goals.

Application Instructions

1. Application. Type or print in ink the attached application form.

2. Transcripts. Arrange for official transcripts from all colleges or universities you have attended, with date of actual or expected degree(s) clearly indicated to be sent to the sent to the Post-Baccalaureate Program in Classical Studies at the address below.

3. Application to Determine Physical Residency/In-State Tuition. If you are a Virginia resident, please complete and submit this form, which can be found on the website of the Office of the Registrar.

4. Letter of Recommendation. Have your recommendation letter(s) sent to the Director of the Post-Baccalaureate Program in Classical Studies by mail or email.

5. Personal Statement. A personal statement, not more than two double-spaced pages, explaining your interest in/prior experience with Classical Studies and how this certificate program will meet your personal or professional goals.

6. Application Fee. Please include a check/money order for the non-refundable application fee, in the amount of $70.00, payable to William & Mary.

7. Submit. Submit completed application materials (1-6 above) and check/money order to:

   Director, Post-Baccalaureate Program
   Department of Classical Studies
   William & Mary
   PO Box 8795
   Williamsburg, VA 23187-8795

8. Students who are admitted to the program will receive a notification of acceptance.
William & Mary is required under federal law to request your taxpayer identification number, which for most enrolling students is a social security number, but providing it is optional for applicants. Federal law requires us to provide to the Internal Revenue Service certain information about all enrolled students, including a taxpayer identification number when one is provided.

The university reserves the right to deny admission to convicted felons or persons not eligible to return to the last institution attended.

Under §23-2.2:1 of the Code of Virginia and the regulations thereunder, every institution of higher education located in Virginia is required to provide to the State Police your name, date of birth and expected date of attendance. When you enroll, William & Mary must comply with this legislation and will do so in a way that safeguards the information provided.

Information regarding your ethnicity is voluntary and allows the university to comply with the reporting requirements of the State Council for Higher Education in Virginia.

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**APPLICANT/STUDENT INFORMATION**

Name: ___________________________ ___________________________ ___________________________  
Last  First  Middle  

Semester/Year to Begin: ___________________________

Former name: ___________________________  
(any other name that may appear on educational record)

Social Security Number: ___________________________

Is this your first William & Mary course?  □ Yes  □ No  If no, please indicate date(s) of last attendance: ___________________________

Current Mailing Address:  
Street: ___________________________  
City: ___________________________  
State: ___________________________  
Zip: ___________________________

Home Phone: (____)  Cell Phone: (____)  Business/Work Phone: (____)

Permanent Address:  
Street: ___________________________  
City: ___________________________  
State: ___________________________  
Zip: ___________________________

Phone: (____)  
Current E-Mail Address: ___________________________

Emergency Contact:  
(Name and relation to you – parent, spouse, etc.)

Citizenship:  □ U.S. Citizen  □ Permanent Resident  □ Non-U.S. Citizen (List Country of Citizenship/Visa status and provide copy of I-94)  Date of Birth: ___________________________

Sex:  □ Male  □ Female

Ethnic Background: Please select one:  □ Hispanic or Latino  □ Not Hispanic or Latino

Please select ALL that apply:  □ American Indian or Alaskan Native  □ Asian  □ Black or African American  □ Native Hawaiian or Other Pacific Islander  □ White

Area of Concentration: If you are interested in applying to graduate programs, please place a check by your main area of interest or concentration. If you are undecided, so indicate.

□ Archaeology  □ Philology (Greek, Latin or both)  □ Ancient History  □ Undecided

Please check the appropriate box below to indicate your enrollment status for the term:

□ Post-baccalaureate (arrange for a transcript from each institution to be sent to the address at the top of this form)

Degree: ___________________________ Date: ___________________________ Institution: ___________________________

Degree: ___________________________ Date: ___________________________ Institution: ___________________________

Degree: ___________________________ Date: ___________________________ Institution: ___________________________
Foreign Language Experience: List any foreign languages you have studied, both ancient and modern, and include the number of years of formal study you have had in each language.

Foreign Travel and Archaeological Experience: List your travel experience outside of the United States, including any experience in archaeological excavation or related work.

References: List below the names and address of two persons who are writing letters on your behalf:

1. 

2. 

Please answer the following: Have you ever been suspended from or otherwise deemed ineligible to return to any educational institution? □ Yes □ No

If yes, please explain.

Have you ever been convicted of or pled guilty or no contest to a felony charge, or to a misdemeanor charge, including any charge of operating a motor vehicle under the influence of intoxicants or other drugs, but not including a minor traffic charge? □ Yes □ No

If yes, please explain the charges and sentence received, date of conviction, any pertinent circumstances you wish us to consider.

I certify that the information in this application is my own and has been prepared by me. If I enroll, I agree to abide by the graduate or undergraduate Honor Code, as well as the rules and regulations of the university. Both the current Undergraduate Catalog and the Student Handbook are accessible on the university’s website. I understand that any untruthful statement in this application would subject me to immediate dismissal from the university, if I am admitted.

Applicant/Student Signature (no font or electronic signature):

*******OFFICE USE ONLY*******

Student ID #: __________________________

Processed by: Initials _______ Date _______

Reference(s) Received: □ YES □ NO

Domicile: □ YES □ NO

Grad Date entered in SGASTDN: _______

Transcript(s) received and attached: _______

Revised: 11/2018