

DEPARTMENT OF CLASSICAL STUDIES
THE COLLEGE OF WILLIAM AND MARY

APPLICATION FOR ADMISSION
POST-BACCALAUREATE CERTIFICATE PROGRAM IN CLASSICAL STUDIES

Please type or print all responses. Write N/A for any question that does not apply to you.

Name:

Ms. Miss Mrs. Mr. Dr. _____
Last First Middle

Former name: _____ (Any other name that may appear on educational records).

Sex: Male Female **Date of birth:** _____

Citizenship status: U.S. citizen

Resident alien: country of citizenship: _____

Non-resident alien: country of citizenship: _____

Current address:

(Number and street, Apt. #, etc.)

(City, State, Country, Zip Code)

Current telephone numbers: Home: _____ Work: _____

Cell: _____

Email: _____

Permanent Address (*if different from current address above*):

(Number and street, Apt. #, etc.)

(City, State, Country, Zip Code)

Emergency Contact:

 (Name and relation to you - parent, spouse, etc.)

 (Telephone number)

Year and Term when you would enter the program (e.g., Fall 2013): _____

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

Educational history: List below all colleges and universities you have attended, their addresses, and degrees you have earned. Please arrange for each of these institutions to send us your transcript.

School	Address	Degree	Date of degree

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 addresses of the two persons who are writing letters on your behalf:

1. _____

2. _____

Signature: _____ Date: _____

Return this application, together with your personal statement explaining the role you hope this program will play in your professional development, to:

Director, Post-Baccalaureate Program
Department of Classical Studies
College of William and Mary
PO Box 8795
Williamsburg, Virginia 23187-8795

Please include a check for the application fee in the amount of \$70.00, payable to The College of William and Mary. Arrange to have your college transcripts sent to the Post-Baccalaureate Director and have your recommenders send their letters to the Director as well.

Students who are admitted to the program will receive a notification of acceptance.

September 25, 2013