

Albert A. List College of Jewish Studies

PART 1: SUPPLEMENT TO THE COMMON APPLICATION

Office of Admissions, Albert A. List College of Jewish Studies
3080 Broadway, Box 32, New York, NY 10027-4649
(212) 678-8832

Enrollment Deadlines *(mandatory: check one)*

Double Degree Program only	<input type="radio"/> Fall Early Decision November 15	<input type="radio"/> Regular Decision January 1	<input type="radio"/> Transfer (Fall Admissions) April 1	
Joint Program or List College only	<input type="radio"/> Fall Early Decision November 15	<input type="radio"/> Winter Early Decision January 15	<input type="radio"/> Regular Decision February 15	<input type="radio"/> Transfer (Fall Admissions) April 1

Enrollment Information

To which programs are you applying? <i>(mandatory)</i>			Please send a recent photograph of yourself.
<input type="radio"/> Joint Program with Columbia University <input type="radio"/> Double Degree Program with Barnard College (women only) <input type="radio"/> List College only			
To enter	Month	Year	

PERSONAL INFORMATION

Name	Last	First	Middle	Social Security Number	<input type="radio"/> Male <input type="radio"/> Female
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
Home Address	Number and Street				
	City	State	Zip	County	Country
Date of Birth					
To what other colleges and universities are you applying? <i>(Your answer will not influence our admissions decision.)</i>					
Do you plan to defer? <i>(Your answer will not influence our admissions decision.)</i>					
How did you hear about our program?					
If a specific person (rabbi/teacher/youth leader/camp counselor/friend) influenced you to apply, please indicate his or her name.					
What is the name of your rabbi/synagogue?	Rabbi	Synagogue	Address		
Please indicate your possible major at	List College	Columbia University	Barnard College		
List any relatives who have attended The Jewish Theological Seminary, Columbia University, or Barnard College					
Name	Relationship	School Attended	Dates		
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Name	Relationship	School Attended	Dates		

SELF-ASSESSMENT

Do you believe your school record accurately reflects your academic ability? Please discuss briefly if not already explained with the Common Application "Additional Information" section.

JEWISH EDUCATION

Please tell us about your formal Jewish education. We are interested in knowing about the congregational schools, Jewish day schools, congregational high schools, Israel study experiences (of two months or more), or colleges of Jewish studies you have attended.

Name	City	State	Dates of Attendance
Name	City	State	Dates of Attendance
Name	City	State	Dates of Attendance

ACTIVITIES

Please list any Jewish summer camps you have attended, Jewish organizations, or Israel experience with which you have been involved if not already explained with the Common Application "Additional Information" section.

Camp or Organization	Date(s)	Camp or Organization	Date(s)
Camp or Organization	Date(s)	Camp or Organization	Date(s)

PERSONAL STATEMENT (Please limit your essay to 500 words)

"I am a different person because of my experiences at List," is a frequent refrain of our alumni. Please reflect on how you imagine your life will be different if you choose our dual-degree program for your college experience rather than attending a traditional liberal arts school.
