JOHN CABOT UNIVERSITY

Application for Admission

www.johncabot.edu

**JOHN CABOT UNIVERSITY EXCHANGE PROGRAM**

**APPLICATION PROCEDURES**

**Study Abroad Admissions**

Non-degree students or study abroad students should fill out an application form and provide documentation as do all other applicants. They are free to select those courses that best suit their interests and which have been approved by their home institution's dean or academic advisor. Non-degree students must have satisfied prerequisites for courses selected.

All candidates are responsible for ensuring that the completed application and all supporting materials reach the Lang Study Abroad Advisor in time for an internal screening. Applications are then forwarded to John Cabot’s Admissions Committee to review the applications and make the final decision.

Applicants will be notified by email and mail of the decision of the Admissions Committee within ten days after their file has been completed.

**Application Deadlines**

**October 1** for spring admission

**March 1** for fall/year admission

Please return this application form and supporting materials to

Dechen Albero, Study Abroad Advisor

Eugene Lang College - The New School

64 W. 11th Street, Rm. 108

New York, NY 10011

alberod@newschool.edu

**APPLICATION FOR ADMISSION**

Please print clearly. State which address you wish to have correspondence sent to.

Name……………………………………………………………………………………………………………

Gender

( ) Male

( ) Female

Current Address…………………………………………………………………………………………………

…………………………………………………………………………………… (until……./….…/………)

Permanent Address ……………………………………………………………………………………………

…………………………………………………………………………………………………………………

Current Tel/Cell phone…………………………………… Permanent Tel……………………………………

Email………………………………………………… Fax……………………………………………………

Date of Birth…………………………………… Country of Citizenship……………………………………

Place of Birth…………………………………… Country of Passport………………………………………

SSN (US Only)…………………………………… Ethnic origin………………………………………………

Passport Number………………………………… Date of Expiration………………………………………

I wish to enroll for:

( ) Fall Semester 20\_\_\_\_\_\_

( ) Summer Session I 20\_\_\_\_\_\_

( ) Spring Semester 20\_\_\_\_\_

( ) Summer Session II 20\_\_\_\_

( ) Academic Year 20\_\_\_\_\_\_\_\_\_

I wish to apply to be a (**X**) study abroad student

Wishing to enroll for (**X**) Undecided/Not Applicable

Will you require Housing through John Cabot University?

( ) Yes, accommodation through the University

( ) No, own accommodation

Upon acceptance to the University, all applicants requesting accommodations arranged through the University must complete a Housing Request Form. More information about JCU Housing and how to apply, can be found at www.johncabot.edu. Applicants will be asked for a housing deposit to secure their accommodations.

**Certification by the Applicant**

(For both Degree Seeking and Study Abroad students) I certify that all the information provided here is my

own work, and to the best of my knowledge, is complete and accurate. I understand that any misrepresentation

of information in this application may result in denial of admission or dismissal.

Signature……………………………………………………………………………..Date……………………

*John Cabot University does not discriminate on the basis of race, color, national origin, religion, gender, age, or disability.*

**Very Important**: *In order to process you application for admission, you must read and sign to give your consent to the Release below. If you refuse your consent for John Cabot University to use your data, it will not be possible for us to continue the application process. All data given will be safeguarded and used only in accordance with standards established by American and Italian law.*

**DATA PRIVACY RELEASE -- PLEASE READ & SIGN**

On the basis of Italian legislative decree n.196 dated 30 June 2003 (hereinafter the 'Privacy Code'), containing provisions concerning the protection of personal data, JOHN CABOT UNIVERSITY, as the data controller, is required to issue instructions in relation to the use of the personal data of its students. The processing will be based on the principles of correctness, lawfulness and transparency together with the protection of the individual's privacy and rights.

1. Source of the personal data - The personal data in the possession of JOHN CABOT UNIVERSITY has been obtained from the individual to which such personal data refers (hereinafter the 'data subject'). The personal data can, furthermore, be obtained from third parties.

2. Categories of data subject to processing - For the purposes indicated below, JOHN CABOT UNIVERSITY processes personal data, such as, for example: name, address or other personal identification elements; information

concerning the level of education and knowledge of languages; information concerning the student's accommodation while attending the university courses. JOHN CABOT UNIVERSITY, furthermore, in the course of its activity, can also process sensitive data including, as an example, information that would permit the disclosure of the ethnic origin of the student, information relative to a handicap or health problems (allergies etc).

3. Purpose and method of processing - The personal data in the possession of JOHN CABOT UNIVERSITY is processed for the purposes relating to the programming and carrying out of its academic activity. With regards to the aforesaid purposes, the processing of personal data is done utilizing instruments of a manual, electronic or automated nature, in accordance with a logic strictly related to the aforesaid purposes and, in all events, in such a way as to guarantee the security and privacy of the data in question.

4. Data controller and data processor - The data controller and data processor for the personal data covered by this information is JOHN CABOT UNIVERSITY.

5. Sphere of communication of the personal data and those who can become aware of the same – For the purposes

indicated under point 3 above, JOHN CABOT UNIVERSITY may communicate the personal data to insurance and social security entities, the public administration, external consultants. The personal data may, furthermore, be communicated to the US Office of JOHN CABOT UNIVERSITY, at Largo, Florida and to other external consultants charged with maintenance of the IT systems.

6. Nature of the conferring of personal data and the consequences of a refusal to reply - With regard to the aforesaid purposes, the processing and the communication of your personal data do not require consent in those cases in which the processing and the communication are necessary to fulfill the obligations deriving from a contract or imposed by the law, by regulations or by EU legislation. With regard to the other purposes, the conferring of personal data is optional; however, refusal to provide the same will be evaluated by the data controller on a case-by-case basis and will determine the related consequences which will be connected to the importance of the data requested vis à vis the management of the relationship with the student.

7. Rights of the data subject - Finally, we inform you that the provisions concerning the protection of personal data allow the data subject to exercise specific rights towards the data controller, on the basis of article 7 of the legislative decree n. 196/2003.

Agreement to the processing of personal data

The undersigned (name and surname) having examined the information provided by JOHN CABOT UNIVERSITY on the basis of article 13 of legislative decree n.196/2003 and the rights recognized under the article 7 of the aforesaid decree:

- Gives his/her consent for the processing of the sensitive data required to undertake the operations indicated in the information.

( ) **I give my consent** ( ) **I refuse my consent**

- Gives his/her consent to the communication of his/her personal data for the reasons indicated and

to the subjects indicated in the information and for the transfer of his/her personal data to the subjects

indicated in paragraph 5 of the information:

( ) **I give my consent** ( ) **I refuse my consent**

Signature……………………………………………………………………………..Date……………………

**Study Plan**

List the courses you would like to take at John Cabot University. Note that you are limited to a **MAX OF 17 CREDITS**.

|  |  |
| --- | --- |
|  | Course title |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |
| 6. |  |
| 7. |  |
| 8. |  |

**Personal Statement**

Please include a personal statement of 300-500 words that describes your reasons for applying to the Eugene Lang College Exchange Program with John Cabot University. How might this opportunity enhance your academic program? What are you most interested in studying, and why? What studies have you already undertaken that stimulated your interest in attending John Cabot, and what do you hope to gain from this experience?

**Emergency Contact**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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City State Zip Code

Home Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important Reminders and Requirements**

1. You must be a matriculated student of Lang College in good academic and disciplinary standing.
2. Minimum cumulative GPA of 3.0 & sophomore standing (~30 credits) by the time of participation in the program.
3. Exchange students will be billed New School (and not JCU) tuition for this program and will keep most of their usual financial aid package. For more information, consult with the Financial Aid office.
4. You are responsible for the following additional expenses: tuition balance (payable to The New School), a JCU student fee (payable to JCU), housing (payable to JCU if electing campus housing), airfare, books, and living expenses, as well as the Italian residency permit fee and Italian visa fee.
5. You must show proof of health insurance coverage during the exchange and must provide documentation as stated in the Italian visa application instructions. Please check with your provider to determine coverage for Italy. Students without health insurance may purchase Italian emergency health insurance (INA), which covers emergency treatment only.

**Application Checklist**

( ) Application form

( ) Personal Statement

( ) Unofficial transcript copies from all institutions I have attended

( ) Faculty letter of recommendation (please use attached form)

**JOHN CABOT UNIVERSITY RECOMMENDATION FORM**

**For the Student:**

Name……………………………………………………………………………………………

Waiver of Access

I have requested that this report be submitted for use in the admissions process and for counseling by officials

of John Cabot University.

( ) I waive access to this report which shall therefore be considered confidential.

Date………………………………

**For the Referee:**

We would appreciate your candid assessment of the student named above, to aid us in evaluating his/her application for admission to John Cabot University. Your recommendation will be of greater than usual importance, as the University's European location calls for personal maturity and makes each student a representative of his/her own country.

Student Signature……………………………………………………

1. Number of years and capacity in which you have known the applicant………………………………

2. Has this applicant displayed intellectual curiosity and shown that he/she enjoys the active exchange of

ideas?

( ) Yes ( ) No

I rate this candidate for admission to John Cabot University on the following criteria:

Overall recommendation…………………………………………………………………………………………………………..

Not recommended Without enthusiasm Fairly strongly Strongly Enthusiastically

For academic promise…………………………………………………………………………………………………………..

For character and personal promise…………………………………………………………………………………………………………………………….

For emotional stability and self-reliance……………………………………………………………………………………………………………………….

For sense of personal integrity………………………………………………………………………………………………………………………………

For relation to peers………………………………………………………………………………………………………………

3.The admissions committee expects that the candidate will have demonstrated both strengths and weaknesses in intellectual and personal make-up. Your comments on his/her abilities, creative capacities and shortcomings would be helpful. **Please use the other side of this page for your remarks**.

**Please return to** Dechen Albero, Study Abroad Advisor, Lang Advising, 64 W. 11th Street, NY, NY 10011.

Signature………………………………………………………………………………………………………..

Name and Position……………………………………………………………………………………………

Institution and Address………………………………………………………………………………………….

Email…………………………………………………………………Telephone……………………………