

## APPLICATION FOR ADMISSION

### *The Master of Arts in Teaching Program at Bard College*

**Please type or print.**

IMPORTANT: Send the completed application form, personal statement, résumé, and nonrefundable \$65 application fee to: Master of Arts in Teaching Program, MAT Admission Committee, Bard College, PO Box 5000, Annandale-on-Hudson, NY 12504-5000.

PRIORITY DEADLINE: February 2, 2009

FINAL DEADLINE: March 31, 2009

The MAT Program at Bard is unique in its combined focus on extended graduate study in an academic discipline and intensive study and mentored experiences in the field of education. The scope of this learning is offered in both a one-year, accelerated program or a two-year part-time program. Check a box below indicating which program option you are applying for.

- I am applying for the One-Year Program option.
- I am applying for the part-time Two-Year Program option.

Please contact us if you have questions. We are very interested in your application and your success if you are accepted to this program.

### ***Personal Information***

Legal name

Last

First

Middle initial

Preferred name

Address

Number and street

Apt.

City

State

Zip

Country

Date of birth

Country of birth

Country of citizenship

Male

Female

Phone

Work

Home

E-mail

How did you find out about our program?

- Internet (please specify Web site or other source) \_\_\_\_\_
- Undergraduate career planning office \_\_\_\_\_
- Undergraduate career fair (please specify) \_\_\_\_\_
- Bard MAT Program Open House \_\_\_\_\_
- Bard alumni/ae \_\_\_\_\_
- Faculty member \_\_\_\_\_
- Radio \_\_\_\_\_
- Newspaper (please specify) \_\_\_\_\_
- Other (please specify) \_\_\_\_\_

Discipline applying in     Literature     Mathematics     Biology     History

Are you applying under the auspices of a dual degree with the Master of Arts in Teaching Program and the Bard Center for Environmental Policy?     Yes     No

Do you plan to apply for a Petrie Fellowship?     Yes     No  
If yes, please see Petrie application information on page 50.

Do you plan to apply for a Math for America Fellowship?     Yes     No  
If yes, please see Math for America application information on page 51.

Are you planning to complete your classroom field experience in  
 New York City or the  Hudson Valley?

**Racial Heritage** (optional)

If you wish to identify your racial heritage, please do so here.

- American Indian or Alaska Native     White, non-Hispanic
- Black, non-Hispanic     Nonresident alien
- Asian or Pacific Islander     Other \_\_\_\_\_
- Hispanic

**Undergraduate Education**

Please list ALL undergraduate institutions you have previously attended. Official transcripts must be submitted to document your attendance. No decision can be made without this documentation. (See instructions.)

College \_\_\_\_\_  
Location \_\_\_\_\_ Degree and dates attended \_\_\_\_\_

College \_\_\_\_\_  
Location \_\_\_\_\_ Degree and dates attended \_\_\_\_\_

College \_\_\_\_\_  
Location \_\_\_\_\_ Degree and dates attended \_\_\_\_\_

Undergraduate major \_\_\_\_\_

**Graduate Education**

Please list ALL graduate institutions you have previously attended. Official transcripts must be submitted to document your attendance. (See instructions.)

Graduate school \_\_\_\_\_  
Location Degree and dates attended

Graduate school \_\_\_\_\_  
Location Degree and dates attended

**Languages**

Is English your native language?  Yes  No

If no, what is your native language? \_\_\_\_\_

**References**

Please list the names, addresses, and titles of three people whom you have asked to write references on your behalf. Be sure to use the forms provided for each reference. (See instructions.)

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

**International Students Only** Language

If you are an international student, you must present TOEFL scores.

TOEFL scores have been requested  Yes  No

I will be taking the TOEFL on \_\_\_\_\_(date) and will have the scores forwarded.

**International Students Only** Residency

Are you in the United States now?  Yes  No

If you are an international student now in the United States, what is your current visa status?

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**Financial Aid**

All students must fill out a FAFSA. It may be downloaded from the website [www.fafsa.ed.gov](http://www.fafsa.ed.gov).

Will you be applying for financial aid?  Yes  No

**Optional Question**

To what other schools are you applying?

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**Please read and sign the following:**

I certify that the information provided on this application and the attached materials is true and accurate to the best of my knowledge. I further understand that any omissions or falsifications may disqualify me from consideration for admission or provide grounds for dismissal. I agree to abide by the policies, rules, and regulations of the Master of Arts in Teaching Program at Bard College.

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Signature

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Date

## LETTER OF RECOMMENDATION

### *The Master of Arts in Teaching Program at Bard College*

#### ***This part to be filled out by applicant***

Applicant's name \_\_\_\_\_

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

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

I hereby (*check one*)  waive  do not waive my right to see this letter of recommendation.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of person making this recommendation

\_\_\_\_\_  
Title/organization  
\_\_\_\_\_

#### ***This part to be completed by the person making the recommendation***

The Master of Arts in Teaching Program at Bard College appreciates your letter of recommendation; it is an integral part of our application process. Please answer the following two questions in the space provided, then proceed with your letter of recommendation.

For how long, and in what capacity, have you known the applicant?

\_\_\_\_\_  
\_\_\_\_\_

How would you rank him or her in relation to other students or professional colleagues you have known?

\_\_\_\_\_  
\_\_\_\_\_

(over)

In a separate letter please offer your insights about this candidate. How serious a scholar is he/she, in your estimation? What are his/her potential strengths as a teacher? Why do you think he/she might be a strong candidate for our program?

Name

---

Signature

---

Title and institution

---

Date

---

Please place your letter and this form in an envelope, and sign your name across the sealed flap.

Return the sealed envelope to: Master of Arts in Teaching Program at Bard College,  
MAT Admission Committee, PO Box 5000, Annandale-on-Hudson, NY 12504-5000.

**This letter must be received by February 2, 2009, for priority consideration.**

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E-mail

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Title/organization

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Signature

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Title and institution

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Date

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**FINANCIAL AID APPLICATION U.S. Citizens**

***The Master of Arts in Teaching Program at Bard College***

Applicants for financial aid who are U.S. citizens must complete both sides of this form and send it to Master of Arts in Teaching Program, MAT Admission Committee, Bard College, Annandale-on-Hudson, NY 12504-5000. Financial aid applicants must also submit the 2009–2010 Free Application for Federal Student Aid (FAFSA) to its designated processor. Copies of the form and additional information about applying for financial aid can be obtained from the MAT Program Office. An application for financial aid will be reviewed once all forms are on file. **Your file should be complete by February 2, 2009, to ensure receipt of the maximum aid for which you are eligible.**

|               |                    |        |                |
|---------------|--------------------|--------|----------------|
| Name          |                    |        |                |
| _____         | _____              | _____  | _____          |
|               | Last               | First  | Middle initial |
| Address       |                    |        |                |
| _____         |                    | _____  |                |
|               | Number and street  | Apt.   |                |
| City          |                    |        |                |
| _____         | _____              | _____  | _____          |
|               | State              | Zip    | Country        |
| Phone         |                    | E-mail |                |
| _____         |                    | _____  |                |
|               | Day / Evening      |        |                |
| Date of birth |                    |        |                |
| _____         |                    |        |                |
|               | Month / Day / Year |        |                |

***Financial Aid Programs and Forms***

Bard FAFSA Code: 002671

I wish to apply for financial aid from the following programs.

Scholarship/Fellowship     Federal Stafford Loan

Date on which I submitted my 2009–2010 FAFSA form: \_\_\_\_\_

Date on which I expect to submit my application for a Federal Stafford Loan: \_\_\_\_\_

**Please attach an explanation of extraordinary expenses or an alternative expense budget if you wish it to be considered with your application for financial assistance.**

## ***Applicant Affirmations***

- A. I understand that I must submit a signed 2007 federal income tax return or a letter from a social services agency as verification of the income figures I submit on my financial aid forms.
- B. I understand that this form, together with the FAFSA, will be used to establish my eligibility for federal student aid programs and that intentionally false statements or misrepresentations may subject me to a fine and/or imprisonment under the U.S. Criminal Code.
- C. I affirm that I will use any money I receive under federally assisted loan programs solely for expenses related to my attendance at Bard College.
- D. I certify that I do not owe a refund on any grant, am not in default on any loan, and have not borrowed in excess of loan limits under the Title IV programs at any institution. I will use all Title IV money I receive only for expenses related to my study at Bard College.
- E. I am aware that in order to receive financial assistance I must make satisfactory progress in the course of study I am pursuing, according to the standards and practices of Bard College.
- F. I certify that I am registered with the Selective Service System.
- I certify that I am not required to be registered with the Selective Service because (check one)
- I am a female.
  - I am on active duty in the armed forces.  
*(Note: Members of the reserves and National Guard are not considered on active duty.)*
  - I have not reached my 18th birthday.
  - I was born before 1960.
  - I am a citizen of the Federated States of Micronesia or the Marshall Islands or a permanent resident of the Trust Territory of the Pacific Islands.

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Applicant signature

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Date

**FINANCIAL AID APPLICATION *Non-U.S. Citizens***

***The Master of Arts in Teaching Program at Bard College***

Applicants for financial aid who are citizens of countries other than the United States must complete this form and send it to Master of Arts in Teaching Program, MAT Admission Committee, Bard College, PO Box 5000, Annandale-on-Hudson, NY 12504-5000. Financial aid applicants from foreign countries must also submit the Foreign Student Financial Aid Application (FSFAA) and the Foreign Student Certification of Finances to the MAT Program Office. An application for financial aid will be reviewed once all forms are on file. **Your file should be complete by February 2, 2009, to ensure receipt of the maximum aid for which you are eligible.**

Name \_\_\_\_\_  
Last First Middle initial

Address \_\_\_\_\_  
Number and street Apt.

City State Zip Country

Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Day / Evening

Date of birth \_\_\_\_\_  
Month / Day / Year

***Financial Aid Programs and Forms***

I wish to apply for a scholarship/fellowship.  Yes  No

Date on which I submitted my Foreign Student Financial Aid Application (FSFAA) and Foreign Student Certification of Finances: \_\_\_\_\_

I am applying for financial aid from the following other sources: \_\_\_\_\_

**Please attach an explanation of extraordinary expenses or an alternative expense budget if you wish it to be considered with your application for financial assistance.**

\_\_\_\_\_  
Applicant signature Date