

# Bard College at Simon's Rock | The Early College

## **Application for Transfer Admission**

Bard College at Simon's Rock is the only four-year residential college of the liberal arts and sciences specifically designed to provide bright, highly motivated students with the opportunity to begin college in a residential environment after the tenth or eleventh grade. We are pleased that you are interested in this unique opportunity.

Like the College's academic and social programs, our admission process focuses on addressing each student as an individual and is designed to identify and support students who we think will thrive at Simon's Rock. It also recognizes that the idea of early college may be a new one for many students, and that they will have many questions that need to be answered clearly and candidly.

In the admission process, we look for candidates with the qualities that characterize our student body: intelligence, academic and extracurricular achievement, motivation, curiosity, a willingness to take their work seriously, and openness to new ideas, people, and experiences. In evaluating students' past academic performance, we consider the standards and rigor of their secondary and undergraduate school curricula, as well as their grades and other accomplishments. We carefully review the application essays, and pay close attention to recommendations.

The application for transfer admission involves both consideration for admission to the college and the evaluation of transfer credit. Credit evaluation will be handled by the Office of Academic Affairs following admission to the college.

**Address application materials to:**

Office of Admission  
Bard College at Simon's Rock  
84 Alford Road  
Great Barrington, MA 01230-1978

**Address questions to:**

Office of Admission  
Phone: 800-235-7186  
Fax: 413-541-0081  
Email: [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

## APPLICATION CHECKLIST

### All Applicants

- Applicant Information.** Please complete this form, sign it, and return it to the Office of Admission. Please be specific in letting us know how you first learned about Simon's Rock.
- Application Fee.** The application fee is \$50 and may be paid by check, money order, or credit card.
- Secondary School Report.** Fill out the top portion of this form and give it to your high school guidance counselor to be submitted in advance of the application deadline.
- Dean's Report.** Fill out the top portion of this form and give it to the dean of your college or other college official. This form must be completed by an official with access to both your academic and disciplinary records and should be sent to the Office of Admission with an official copy of your college transcript.
- Letters of Recommendation.** After filling out the top portion of these forms, you should give them to individuals who know you and your work best. Two recommendations must be from academic teachers in two different core academic subject areas, at least one of whom should be an instructor of a full credit college course. A third is optional and may be completed by another adult who knows you well, such as an extracurricular activity advisor or a work supervisor. We also advise that you provide each recommender with a stamped envelope addressed to the Office of Admission.
- Writing Samples.** See instructions in the back of the application.
- Interview.** An interview is required of each applicant. We prefer that the interview be part of a visit to campus. If distance and scheduling make this impossible, please contact us to schedule a phone, Skype or off-campus interview.
- Optional: Standardized Test Scores.** College entrance exam scores are optional. Applicants who choose to submit them should have PSAT, SAT, ACT, or PLAN scores sent directly to us or included on their official transcripts.

### International Applicants

*International students are welcome to apply. In addition to the items listed above, the following requirements apply:*

- TOEFL Scores.** If English is not your first language, or if you have not attended a school in which English is the primary language of instruction for at least two full years, you must submit TOEFL scores. These should be sent directly to the Office of Admission or included on the official transcript.
- International Student Certification of Finances.** International applicants requiring an F1 student visa must complete this form, available at <http://www.simons-rock.edu/financialaidforms.html>, and submit it with the rest of your application.

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Office of Admission  
84 Alford Road  
Great Barrington, MA 01230-1978

APPLICATION FOR ADMISSION

Phone: 800-235-7186 Fax: 413-541-0081

E-mail: [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## Applicant Information

To be completed by student

### PERSONAL INFORMATION

Legal Name

*Enter name exactly as it appears on birth certificate, passport, or other official documents.*

Usually Called

Birthdate / /  
mm dd yyyy

Gender

Permanent Home Address

*Number and Street*

*Apt. No.*

*City/Town*

*State/Province*

*Country*

*Zip or Postal Code*

Home Phone

Fax

Cell Phone

E-mail

*If you use spam filtering, please accept email from simons-rock.edu*

If your current mailing address is different from the above (such as boarding school, study abroad, etc.), please indicate this below. This is the address to which admission correspondence will be sent.

Mailing Address from / / to / /  
mm dd yyyy mm dd yyyy

*Number and Street*

*Apt. No.*

*City/Town*

*State/Province*

*Country*

*Zip or Postal Code*

Phone

Fax

### Citizenship

U.S. Citizen

Dual U.S. Citizen (specify other country of citizenship):

U.S. Permanent Resident:

*Country of Citizenship*

*Alien Registration Number*

Other Citizenship:

*Country(ies)*

*Visa type*

If you are not a U.S. citizen and live in the U.S., how long have you been in the country?

#### The following information is optional:

Please check all that apply:

African American, Black

Mexican American, Chicano/a

American Indian, Alaska Native (tribal affiliation) enrolled )

Native Hawaiian, Pacific Islander

Asian American (country/ies of family's origin )

Puerto Rican

Asian, including Indian subcontinent (country/ies )

White, Caucasian

Hispanic, Latino/a (country/ies )

Other (specify \_\_\_\_\_)

First language if other than English

Language(s) spoken at home

Place of Birth

*City/Town*

*State/Province*

*Country*

*Zip or Postal Code*



**ACADEMIC INFORMATION****College or University**

(currently or most recently attended) \_\_\_\_\_ Dates Attended \_\_\_\_\_

Major \_\_\_\_\_ Credits Earned \_\_\_\_\_ Anticipated Year of Graduation \_\_\_\_\_

School Address \_\_\_\_\_

*Number and Street**City/Town**State/Province**Country**Zip or Postal Code*Type of college:  Public  Private

Advisor's Name \_\_\_\_\_

Advisor's Phone \_\_\_\_\_ Advisor's Fax \_\_\_\_\_

Advisor's E-mail \_\_\_\_\_

**High School**

(most recently attended) \_\_\_\_\_ Dates Attended \_\_\_\_\_

CEEB/ACT Code \_\_\_\_\_ Highest Grade Completed \_\_\_\_\_ Graduation Year \_\_\_\_\_

*Available at your guidance counselor's office.*

School Address \_\_\_\_\_

*Number and Street**City/Town**State/Province**Country**Zip or Postal Code*Type of school:  Public  Private  Parochial  Home School

Guidance Counselor's Name \_\_\_\_\_

Counselor's Phone \_\_\_\_\_ Counselor's Fax \_\_\_\_\_

Counselor's E-mail \_\_\_\_\_

List all other schools you have attended since the ninth grade beginning with the most recent. Include all colleges or universities at which you have taken courses for credit. Attach additional sheets if necessary. Please arrange to have an official transcript sent from each school as soon as possible.

Name of School	Location	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Academic Honors**

Briefly list and describe any academic honors or distinctions you have won beginning with the ninth grade. If necessary, please attach additional information on a separate sheet.

## ACTIVITIES INFORMATION

### Summer Programs

Please list any summer programs in which you have participated since the ninth grade. If necessary, please attach additional information on a separate sheet.

Program Name	Location	Dates Attended

### Extracurricular Activities

Please list your principal extracurricular, community service, and family activities and hobbies in the order of their interest to you. Include specific events and/or major accomplishments such as musical instruments played, awards won, leadership positions held. Check those activities you hope to pursue in college. If necessary, please attach additional information on a separate sheet.

Activity	Grade level(s) Participated				Approx. time spent		Positions held/Honors won	I plan to participate in college?	
	9	10	11	12	Cc	Hours per week			Weeks per year
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>

### Work Experience

Please list any jobs you have held since you started high school. If necessary, please attach additional information on a separate sheet.

Job/specific nature of work	Employer	Dates of employment	Hours per week

Which of the above activities (summer programs, extracurricular activities, work experience) has meant the most to you and why?

**ADDITIONAL INFORMATION**

Have you been out of school for more than one month (excluding summers and other official school vacations) since the ninth grade?

yes  no

If yes, please explain on a separate piece of paper why and what you did during this time.

Have you been suspended, expelled, or required to withdraw from any of the schools you attended?

yes  no

If yes, please explain on a separate piece of paper and provide the name of the person at that school with whom we may discuss the matter.

**Interview**

An interview is required as part of the application. Please indicate your plans below.

I have had an interview.

*Name of interviewer*

*Date*

*Location*

I will call to schedule an interview.

I plan to visit campus and be interviewed at that time.

*Please indicate date of campus visit.*

**Financial Aid**

Will you be applying for financial aid?  yes  no

If yes, Simon's Rock requires the following financial forms. Please list the dates on which those were, or will be, filed.

*If you are applying for financial aid, we strongly recommend that you submit the applications for admission and for financial aid as far as possible in advance of the April 15 financial aid priority deadline.*

**Required Financial Aid Forms**

Date Filed/Will Be Filed

**U.S. Citizens and Eligible Non Citizens**

Free Application for Federal Student Aid (FAFSA): [www.fafsa.ed.gov](http://www.fafsa.ed.gov) (SR Code #009645)

\_\_\_\_\_

The College Board PROFILE (CSS Profile): [profileonline.collegeboard.com](http://profileonline.collegeboard.com) (SR Code #3795)

\_\_\_\_\_

Verification Worksheet: [www.simons-rock.edu/financialaidforms.html](http://www.simons-rock.edu/financialaidforms.html)

\_\_\_\_\_

Non-Custodial Parent Statement (if applicable): [www.simons-rock.edu/financialaidforms.html](http://www.simons-rock.edu/financialaidforms.html)

\_\_\_\_\_

Parent/Guardian and student most recent income tax forms: submit using IRS Data Retrieval through FAFSA or order an IRS Transcript at [www.irs.gov](http://www.irs.gov)

\_\_\_\_\_

**International Students**

International Student Financial Aid Application: [www.simons-rock.edu/financialaidforms.html](http://www.simons-rock.edu/financialaidforms.html)

\_\_\_\_\_

International Student Certification of Finances: [www.simons-rock.edu/financialaidforms.html](http://www.simons-rock.edu/financialaidforms.html)

\_\_\_\_\_

**Application Fee**

The application fee is \$50.00.

I have enclosed a check or money order.  I have attached a fee waiver from my guidance counselor.

**Student and Parent/Guardian Signatures**

Simon's Rock is an academic community in which students are expected to be active and engaged learners, while demonstrating honesty and integrity, and taking responsibility for their actions. By signing this form, the applicant and parent attest that all information contained in this application is complete, factually accurate, and honestly presented. The applicant agrees to contact the Office of Admission should any information contained herein change once the application is submitted.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent/Guardian Signature (if applicant is under 18)*

\_\_\_\_\_  
*Date*

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Office of Admission  
84 Alford Road  
Great Barrington, MA 01230-1978

APPLICATION FOR ADMISSION  
Phone: 800-235-7186 Fax: 413-541-0081

E-mail: [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## Secondary School Report

After filling in the information below, please give this form to your former guidance counselor.

Applicant Name		
<i>Last</i>	<i>First</i>	<i>Middle</i>
Permanent Home Address		
<i>Number and Street</i>		<i>Apt. No.</i>
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>
<i>Zip or Postal Code</i>		
Phone		Email

*Applicant, do not write below this line.*

### To the Secondary School Guidance Counselor:

Attach applicant's official transcript, including courses in progress, a school profile, grading scale, and transcript legend. (Please check transcript copies for readability.) After filling in the blanks below, use both sides of this form to describe the applicant. Please provide all available information for this applicant. Be sure to sign on the reverse.

#### About Your School:

Grade Scale (please indicate the numeric range for each letter grade): A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ D \_\_\_\_\_ F \_\_\_\_\_

Passing mark \_\_\_\_\_

Percentage of graduating class attending: \_\_\_\_\_ four-year \_\_\_\_\_ two-year institutions

Are classes taken on a block schedule?  yes  no If yes, in what year did block scheduling begin? \_\_\_\_\_

Date final grades are available: Fall Semester \_\_\_\_\_ Spring Semester \_\_\_\_\_

#### About the Applicant:

Class rank \_\_\_\_\_ in a class of \_\_\_\_\_, covering a period from \_\_\_\_\_ to \_\_\_\_\_  
(mm/yyyy) (mm/yyyy)

The rank is  weighted  unweighted. How many students share this rank? \_\_\_\_\_

If a precise rank is not available, please indicate rank to the nearest tenth from the top \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ on a \_\_\_\_\_ scale, covering a period from \_\_\_\_\_ to \_\_\_\_\_  
(mm/yyyy) (mm/yyyy)

This GPA is  weighted  unweighted. Highest grade/GPA in class \_\_\_\_\_

The courses this student is taking are  most  mixed  least rigorous available to him/her

Counselor's Name: Dr. / Mr. / Mrs. / Ms. \_\_\_\_\_  
*Please print or type*

Counselor's School \_\_\_\_\_ Position \_\_\_\_\_

Counselor's Address \_\_\_\_\_

Counselor's Phone \_\_\_\_\_ Counselor's Fax \_\_\_\_\_

Secondary School CEEB/ACT Code \_\_\_\_\_ Counselor's E-mail \_\_\_\_\_



**EVALUATION (OPTIONAL)**

Please write whatever you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the applicant's intellectual promise, motivation, maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, enthusiasm, concern for others, respect accorded by faculty, and reaction to setbacks. We welcome information that will help us to differentiate this student from others.

Did this student leave or graduate in good academic standing?  Yes  No  
 If no, please explain on a separate sheet.

Was this student ever subject to any disciplinary action?  Yes  No  
 If yes, please explain on a separate sheet.

Please indicate whether these comments come from  personal knowledge of the student or  written record.

How long did you know this student \_\_\_\_\_ and in what context? \_\_\_\_\_

What are the first words that come to your mind to describe this student? \_\_\_\_\_

Compared to other students in his or her class year, please rate where the applicant's abilities place him or her.

		1%	5%	10%	25%	50%	Below Top 50%
Candidate places in the upper:							
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular Accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Qualities and Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student:  enthusiastically  without reservation  with slight reservations  with strong reservations

**CONFIDENTIALITY**

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at Simon's Rock. In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students do have access to their permanent files, which may include forms such as this one. Unless required by state law, colleges may not provide access to admission records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

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**Office of Admission**  
84 Alford Road  
Great Barrington, MA 01230-1978

**APPLICATION FOR ADMISSION**  
Phone: 800-235-7186 Fax: 413-541-0081

E-mail: [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## College Dean's Report

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### To the Applicant:

After filling in the information below, please give this form to an official at your institution. This form must be completed by a dean or other official who has access to your academic and disciplinary records.

Applicant Name \_\_\_\_\_  
Last
First
Middle

Permanent Home Address \_\_\_\_\_  
Number and Street
Apt. No.

\_\_\_\_\_

City/Town
State/Province
Country
Zip or Postal Code

Phone \_\_\_\_\_ Email \_\_\_\_\_

Please list all courses you are taking in the current academic year. Indicate title, level, and credit value of each course. Please include summer courses if applicable.

First Semester/Trimester	Second Semester/Trimester	Third Trimester
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Applicant, do not write below this line.*

---

### To the College Official:

Attach applicant's official transcript, including courses in progress. After filling in the blanks below, use both sides of this form to describe the applicant. Please provide all available information for this applicant. **Be sure to sign below.**

### About the Applicant:

Cumulative GPA \_\_\_\_\_ on a \_\_\_\_\_ scale, covering a period from \_\_\_\_\_ to \_\_\_\_\_  
(mm/yyyy)
(mm/yyyy)

This GPA is  weighted  unweighted. Highest grade/GPA in class \_\_\_\_\_  
Lowest passing grade is \_\_\_\_\_

Official's Name: Dr. / Mr. / Mrs. / Ms. \_\_\_\_\_  
Please print or type

Official's School \_\_\_\_\_ Position \_\_\_\_\_

School Address \_\_\_\_\_

Official's Phone \_\_\_\_\_ Official's Fax \_\_\_\_\_

Official's E-mail \_\_\_\_\_

\_\_\_\_\_  
Signature
Date

**EVALUATION (OPTIONAL)**

Please write whatever you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the applicant's intellectual promise, motivation, maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, enthusiasm, concern for others, respect accorded by faculty, and reaction to setbacks. We welcome information that will help us to differentiate this student from others.

Did this student leave or graduate in good academic standing?  Yes  No  
If no, please explain on a separate sheet.

Was this student ever subject to any disciplinary action?  Yes  No  
If yes, please explain on a separate sheet.

Please indicate whether these comments come from  personal knowledge of the student or  written record.

How long did you know this student \_\_\_\_\_ and in what context? \_\_\_\_\_

What are the first words that come to your mind to describe this student? \_\_\_\_\_

Compared to other students in his or her class year, please rate where the applicant's abilities place him or her.

		1%	5%	10%	25%	50%	Below Top 50%
Candidate places in the upper:							
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular Accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Qualities and Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student:  enthusiastically  without reservation  with slight reservations  with strong reservations

**CONFIDENTIALITY**

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at Simon's Rock. In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students do have access to their permanent files, which may include forms such as this one. Unless required by state law, colleges may not provide access to admission records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation.

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E-mail: [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## Recommendation: College Instructor

Applicant Name			
<i>Last</i>	<i>First</i>	<i>Middle</i>	
Permanent Home Address			
<i>Number and Street</i>			<i>Apt. No.</i>
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone		Email	

### To the Applicant:

Under the provision of the Family Educational Rights and Privacy Act of 1974, you have the right, if you enroll at Simon's Rock, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please indicate by checking the appropriate box and signing your name whether or not you wish to waive this right.

I  waive  do not waive my right to view this recommendation.

Applicant's signature	Date
-----------------------	------

Applicant, do not write below this line.

### To the Recommender:

Simon's Rock is a selective, private, nondenominational, coeducational college of the liberal arts and sciences specifically designed to offer bright, highly motivated students the opportunity to begin college after the tenth or eleventh grade. We appreciate your frank and detailed account of the candidate. Please complete both sides of this form and return it to the college address above.

Name of Recommender		Title	
College/University Name			
School Address			
<i>Number and Street</i>			
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone	Fax	E-mail	

How long and in what capacity have you known the applicant?

List courses in which you have taught the applicant, noting for each the applicant's year in school, the level of course difficulty (honors, 100-level, 200-level, etc.), and the grade earned by the applicant.

**RATINGS**

Compared to other students to whom you have taught class, how do you rate this student in terms of:

No basis	Below average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
Academic achievement							
Intellectual promise							
Quality of writing							
Creative, original thought							
Productive class discussion							
Respect accorded by faculty							
Disciplined work habits							
Maturity							
Motivation							
Leadership							
Integrity							
Reaction to setbacks							
Concern for others							
Self-confidence							
Initiative, independence							
Overall							

1. What are the first words that come to your mind to describe this student?

2. Why do you believe this student is seeking admission to another college?

3. **Evaluation:** Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us differentiate this student from others. Feel free to attach an additional sheet or address these questions in a letter on official institution letterhead.

I recommend this applicant for admission to Simon’s Rock:

- enthusiastically     
  without reservation     
  with slight reservations     
  with strong reservations

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**Phone:** 800-235-7186 **Fax:** 413-541-0081

**E-mail:** [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## Recommendation: College or High School Instructor

Applicant Name			
<i>Last</i>	<i>First</i>	<i>Middle</i>	
Permanent Home Address			
<i>Number and Street</i>			<i>Apt. No.</i>
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone		Email	

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I  waive  do not waive my right to view this recommendation.

Applicant's signature	Date
Applicant, do not write below this line.	

### To the Recommender:

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Name of Recommender		Title	
College/University or HS Name			
School Address			
<i>Number and Street</i>			
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone	Fax	E-mail	

How long and in what capacity have you known the applicant?

List courses in which you have taught the applicant, noting for each the applicant's year in school, the level of course difficulty (honors, 100-level, 200-level, etc.), and the grade earned by the applicant.

## RATINGS

Compared to other students to whom you have taught class, how do you rate this student in terms of:

	No basis	Below average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
Academic achievement								
Intellectual promise								
Quality of writing								
Creative, original thought								
Productive class discussion								
Respect accorded by faculty								
Disciplined work habits								
Maturity								
Motivation								
Leadership								
Integrity								
Reaction to setbacks								
Concern for others								
Self-confidence								
Initiative, independence								
Overall								

1. What are the first words that come to your mind to describe this student?
  
  
  
  
  
2. Why do you believe this student is seeking admission to another college?
  
  
  
  
  
3. Evaluation: Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us differentiate this student from others. Feel free to attach an additional sheet or address these questions in a letter on official institution letterhead.

I recommend this applicant for admission to Simon's Rock:

enthusiastically     
  without reservation     
  with slight reservations     
  with strong reservations

Signature of Recommender

Date

# Bard College at Simon's Rock | The Early College

**Office of Admission**  
**84 Alford Road**  
**Great Barrington, MA 01230-1978**

**APPLICATION FOR ADMISSION**

**Phone:** 800-235-7186 **Fax:** 413-541-0081

**E-mail:** [admit@simons-rock.edu](mailto:admit@simons-rock.edu)

Applying to enter in:  Fall  Spring 20\_\_\_\_\_

## Recommendation: Optional

Applicant Name			
<i>Last</i>	<i>First</i>	<i>Middle</i>	
Permanent Home Address			
<i>Number and Street</i>			<i>Apt. No.</i>
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone		Email	

### To the Applicant:

Under the provision of the Family Educational Rights and Privacy Act of 1974, you have the right, if you enroll at Simon's Rock, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please indicate by checking the appropriate box and signing your name whether or not you wish to waive this right.

I  waive  do not waive my right to view this recommendation.

Applicant's signature	Date
Applicant, do not write below this line.	

### To the Recommender:

Simon's Rock is a selective, private, nondenominational, coeducational college of the liberal arts and sciences specifically designed to offer bright, highly motivated students with the opportunity to begin college after the tenth or eleventh grade. We appreciate your frank and detailed account of the candidate. Please complete both sides of this form and return it to the college address above.

Name of Recommender		Title	
College/University or HS Name			
School Address			
<i>Number and Street</i>			
<i>City/Town</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip or Postal Code</i>
Phone		Fax	E-mail

How long and in what capacity have you known the applicant?

List courses in which you have taught the applicant, noting for each the applicant's year in school, the level of course difficulty (AP, IB, honors, 100-level, 200-level, etc.), and the grade earned by the applicant.




## RATINGS

Compared to other students to whom you have taught class, how do you rate this student in terms of:

	No basis	Below average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
Academic achievement								
Intellectual promise								
Quality of writing								
Creative, original thought								
Productive class discussion								
Respect accorded by faculty								
Disciplined work habits								
Maturity								
Motivation								
Leadership								
Integrity								
Reaction to setbacks								
Concern for others								
Self-confidence								
Initiative, independence								
Overall								

1. What are the first words that come to your mind to describe this student?

2. Why do you believe this student is seeking admission to another college?

3. Evaluation: Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us differentiate this student from others. Feel free to attach an additional sheet or address these questions in a letter on official institution letterhead.

I recommend this applicant for admission to Simon's Rock:

enthusiastically       without reservation       with slight reservations       with strong reservations

Signature of Recommender

Date

## Writing Samples

The two writing samples are designed to give us a sense of your writing voice and command of language, as well as a sense of what and how you think. Each essay should be two to three pages in length, double spaced.

### WHY HERE, WHY NOW?

What goals, ambitions, and motivations have led you to apply for admission to Bard College at Simon's Rock? Are there particular experiences, either academic or personal, that have contributed to your desire to attend an early college? How does the particular kind of education and community that Simon's Rock offers fit with your own desires for intellectual and personal growth? How will your presence affect the academic and social environments at Simon's Rock?

### CRITICAL ANALYSIS

Reflect on the following passage from cultural anthropologist Joseph Campbell's *"The Power of Myth."* Compose a two to three page essay refuting or supporting his stance, taking into consideration its application to issues of present day technology, government, culture, ethics, or another area that is of particular interest to you.

*"...myths offer life models. But the models have to be appropriate to the time in which you are living, and our time has changed so fast that what was proper fifty years ago is not proper today. The virtues of the past are the vices of today. And many of what were thought to be the vices of the past are the necessities of today. The moral order has to catch up with the moral necessities of actual life in time, here and now. And that is what we are not doing."*

### OPTIONAL

We invite you to submit a piece of your own work (or description of a project, in any form you deem appropriate) that has particularly intrigued and excited you. Examples include but are not limited to a writing sample, a position paper, a problem solution, a poem or short story, a graded test, a research paper, a science project, a copy of a drawing, painting, or photograph, or a recording of music, a film, or a performance.