

Undergraduate Application for Admission



UNIVERSITY OF NEW ENGLAND

OFFICE OF UNDERGRADUATE ADMISSIONS UNIVERSITY OF NEW ENGLAND 11 HILLS BEACH ROAD BIDDEFORD, MAINE 04005-9900 TELEPHONE: (800) 477-4UNE OR (207) 602-2297

WWW.UNE.EDU



Important Dates:

- December 1st Early Action Deadline (Freshman only)*
- February 15th Regular Freshman Admission Application Deadline
- February 15th Transfer Early Action Deadline for Nursing and Dental Hygiene Programs
- December 1st Transfer Application Deadline for Spring Semester
- March 15th Transfer Early Action Deadline for Fall Semester
- * Freshman applying on or before December 1st will receive notification by January 1st; this is a non-binding early notification.

Applications that are received after any of the regular application deadlines will be reviewed on a space available basis.



Undergraduate Application for Admission

Biddeford and Portland, Maine • Telephone: (207) 602-2297 or (800) 477-4UNE

The University of New England does not discriminate in admission or access to, or treatment or employment in, its programs and activities on the basis of race, ethnicity, national origin, gender, sexual orientation, religion, age, veteran status, or disabling conditions in violation of federal or state civil rights laws of Section 504 of the Rehabilitation Act of 1973. Inquiries or concerns may be addressed to the Director of Affirmative Action.

Directions:

- 1. Complete all sections and return, including the nonrefundable \$40.00 application fee, to the Office of Undergraduate Admissions, University of New England, 11 Hills Beach Road, Biddeford, Maine 04005.
- 2. Arrange to have all high school and college records and test scores (ACT, SAT or TOEFL) sent to the Office of Undergraduate Admissions.
- 3. Submit essay/personal statement (not less than 250 words).
- 4. Submit two recommendations, either letters or use UNE recommendation forms.

Last Name/Maiden Name if applicable			First (Legal)	Middle	
Address		City			
State Zip		Area Code/Telephone Number		Area Code/Cell Phone Number	
Date and Country of Birth Countr		Country of Citizenship	E-	mail Address	
□ First-Time Freshman	□ Transfer	Entering Date: 🛛 F	all (year)	D Spring (year)	
I intend to live:	□ in a residence hall	□ at home with rela	ative 🛛 Other		
	•		granted The Office of Undergraduate /	Admissions, University of New England,	
□ Male □ Female	Ethnicity: (pl Hispanic/ Not Hispa Decline to	nic/Latino	 Please check all that apply American Indian or Alaska Asian Black or African Americar Native Hawaiian or other Pacific Islander 	an Native U White Two or more races	
Name of Father/Guardia	n		Name of Mother/Guardian		
Address (if different from	above)		Address (if different from a	above)	
Occupation		Employer	Occupation	Employer	
Position or Title		Business Phone	Position or Title	Business Phone	
College (if attended)		Degree(s) earned	College (if attended)	Degree(s) earned	
E-mail address			E-mail address		

Intended field of study (check one):

intended held	of study (check one).					
Animal Behavio	Behavior Chemistry/Secondary Education-Science			Medical Biology		
Animal Behavio	or/Pre-Vet	Communications		Medical Biology/Pre-Dental		
Animal Behavio	or/Secondary Education–Science	Dental Hygiene		Medical Biology/Pre-Med		
□ Applied Social	and Cultural Studies/	□ Elementary Education/K-8 Certification		Medical Biology/Pre-Optometry		
Health, Medici	ine and Society	English		□ Medical Biology/Pre-Physician Assistant 3+2		
□ Applied Social	and Cultural Studies/	English/Pre-Law		□ Medical Biology/Pre-Physician Assistant 4+2		
Community, Hı	uman Services and Society	English/Secondary I	Education-English	Medical Biology/Pre-Vet		
□ Applied Social	and Cultural Studies/	Environmental Scier	ice	□ Neuroscience		
Law, Crime and		Environmental Scien	ce/Secondary Education-Science	□ Neuroscience/Secondary Education–Science		
Applied Exercis		Environmental Studi		Nursing (freshmen only)		
□ Applied Mathe		Environmental Studi	es/Secondary Education-Science	Ocean Studies and Marine Affairs		
		☐ Health, Wellness an	d Occupational Studies	Political Science		
	nd Aquarium Science	History		Political Science/Pre-Law		
	nd Aquarium Science/	History/Pre-Law		Political Science/		
	ucation-Science		Education-Social Studies	Secondary Education-Social Studies		
Art and Design	n Media	Laboratory Science		Pre-Pharmacy (2+4 Pharm.D.)		
Art Education			Secondary Education-Science	Psychology		
Athletic Trainin	Ig	Liberal Studies		Psychology/Pre-Vet		
Biochemistry		□ Marine Sciences/M		Psychology/Secondary Education-		
	Secondary Education-Science	☐ Marine Sciences/Oc	0,1,1	Social Studies		
Biological Scie	ences	□ Marine Sciences/M	arine Biology/			
Biological Scie	nces/Secondary Education-Science	Secondary Educatio		Sociology/Secondary Education-Social Studies		
Business		Marine Sciences/Oc		Sport Management		
Chemistry		Secondary Educatio	n-Science	Undecided/Undeclared		
 Not at this time Yes. Please select ONE designation below: Doctor of Dental Medicine 4+4* Doctor of Osteopathic Medicine 3+4 Doctor of Osteopathic Medicine 4+4* Doctor of Physical Therapy 4+3* Doctor of Physical Therapy 4+3* Master of Science Physician Assistant 4+2* Doctor of Physical Therapy 4+3* Doctor of Physical Therapy 4+3* Cavailable only to Pre-Pharmacy (2+4 PharmD) majors) 						
□ Master of Social Work 4+2*		Master of Science Physician As (available as here Madian Biology)				
* OPEN TO	(available only to Medical Biology/Pre-Physician Assistant 3+2 majors) * OPEN TO ALL MAJORS except Pre-Pharmacy and Medical Biology/Pre-PA 3+2					
I would like to be	e considered for financial assistance	e. □Yes □No				
A Free Applicatio	n for Federal Student Aid (FAFSA) fo	rm should be complete	d and filed. You must file it elect	ronically at www.fafsa.edu.gov. Please file your		
FAFSA as soon a	s possible after January 1st, and pr	referably not later than	April 1st.			
Are you a first ge	neration college student in your fan	nily? (i.e. neither of your	parents attended a college or un	iversity) 🗆 Yes 🗆 No		
Do vou have a fri	end who is attending or has attende	ed UNE? 🛛 Yes I	□ No If yes, name			
	lative who is attending or has atten					
Have you applied to UNE before? Yes No If yes, when						
Have you ever tal	lave you applied to UNE before?					
Are you a veterar	n of the U.S. military? □ Yes	□ No				
Are you on active military duty, or a dependent whose parent(s) is/are assigned to the State of Maine? Yes No						
List all high scho	List all high schools you have attended (list most recent one first):					

NAME ADDRESS DATES OF ATTENDANCE/GRADUATION

If outside the U.S., list the diploma certificate_

Have you earned any college credit by examination? (AP, CLEP, etc.)

If yes, please send the official scores to: The Office of Undergraduate Admissions, 11 Hills Beach Road, Biddeford, ME 04005

Name of high sch	ool guidance/college coun	selor		
Guidance/college	counselor phone number_			
Name of high sch	ool			
Address of high so	chool			
l ist all colleges vo	ou have attended (list mos	t recent one first):		
NAME	ADDRESS	DATES OF ATTENDANCE	MAJOR	DATES OF ATTENDANCE/GRADUATION
	AUDRESS	DATES OF ATTENDANCE	MAJOR	
If you have attend	ed college, were you ever	subject to academic or nonacademic disc	siplinary action? If yes, explair	1
-	en convicted, as an adult, o	of a felony or entered a plea of guilty or n and state.	o contest to a criminal charge	9? 🗆 Yes 🗆 No
	-	n involved in at high school and/or colleg at are your hobbies or interests?	e, and positions held.	
What sports have	you participated in? Pleas	e indicate club or varsity and years playe	d.	
What kind of extra	curricular activities would	be of interest to you at UNE (sports, club	os, etc.)?	
Mention any spec	ial awards or recognition y	ou have received.		
or teacher), as we year or more it is an opportunity to application. Applic	II as an essay/personal si recommended that he/she address their reasons for	mmendation, or submit UNE recommend atement (not less than 250 words) in su a include a statement elaborating about t wanting to transfer. The recommendation am may also submit scores from the Nurs ilable.	pport of their application. If a his time away from school. Tra s and essay/personal statem	n applicant has been out of school for a ansfer applicants may use the essay as ent are a required part of the
-	s relating to this application	information given on this application is c n shall be grounds for dismissal from the		
Applicant's Signat	ure		Date	
Name of Person R	esponsible for Bills			



Recommendation Form

11 Hills Beach Road, Biddeford, ME 04005 · Telephone: (207) 602-2297 or (800) 477-4UNE

Name of Student

OPTIONAL WAIVER OF RIGHT OF ACCESS I undersigned, understand that the information provided in this letter from _______ will be used by the University in deciding upon my application for admission. I hereby waive any and all rights of access to this letter I might have under the Family Educational Rights and Privacy Act of 1974, and other related laws, regulations.

Signature____

_____ Date____

The above-named applicant has applied for admission to the University of New England. We ask that you complete both sides of this recommendation form and return it directly to the Office of Undergraduate Admissions as soon as possible. Than you for your contributions.

A) In making the following ratings, please keep in mind that they will be used to compare this student with his or her entire class. Please check the single most appropriate box.

	Below Average	Average	Good (Above Average)	Excellent	One of the Top Few I have Encountered	No Basis for Judgment
a. Academic maturity						
b. Academic self-discipline						
c. Academic growth potential						
d. Respect accorded by faculty						
e. Emotional maturity						
f. Reaction to setbacks						
g. Warmth of personality						
h. Concern for others						
i. Self-confidence						
j. Leadership						

B) 1. How long have you known the applicant?_____

2. In what capacity?_____

3. This report is based on (check all that apply):

Personal observation and contact with applicant

□ Others' observations

Teacher's comments

□ Employer/employee relationship

□ Records

□ Other (please specify)____

С) In the space below we would appreciate your assessment of this applicant for admission to the University of New England. We are
	particularly interested in the student's communication skills, academic and emotional maturity, and growth potential. We would like
	you to know that this is an important element of the application process, and ask that you be as detailed and candid in your comment
	as you feel comfortable.

Signature	Date
Name	Title
	nuo
Address	
	Telephone Number

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