



Northfield Mount Hermon, #5392

Applicant's name

Preferred name

Male

Female

Cell Phone

Applying for grade

Boarding

Day *(You must check one)*

International Students

If you are planning to attend NMH as a special one-year, non-degree candidate, check here.

Country of passport or citizenship *(if dual citizen, please indicate)*

Language of the home

Do you have an Alien Registration Card (green card)? No Yes

Have you applied to Northfield Mount Hermon before? No Yes If yes, what year?

Have you ever attended NMH Summer Session? No Yes

If yes, what year?

For US Citizens only (optional):

To maintain our diverse student body and support affirmative action, we have included the following **optional** question:

How would you describe yourself?

African American/Black White/Caucasian Asian American Hispanic *(please specify)*

Biracial/Multiracial *(please specify)* American Indian/Alaskan Native *(please specify)*

Testing

SSAT *(Date of Testing)*

ISEE *(Date of Testing)*

PSAT *(Date of Testing)*

SAT *(Date of Testing)*

ACT *(Date of Testing)*

TOEFL *(Date of Testing)*

For complete information and online registration for the SSAT, please visit www.ssat.org.

For All Applicants (REQUIRED): Please answer the following questions.

Is English your first language? No Yes

Has English been the primary language of instruction for your most recent three years of schooling? No Yes

If you have not been instructed in English for the last three years or English is not the primary language of your home, you will also need to take the TOEFL exam.

Applicant's name

List of Schools/(and locations) you have attended since grade 6	Grade Level	Date attended from	Date attended to
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Please list other schools to which you are applying.

You are required to answer each question below.

Have you ever had any scholastic difficulties? No Yes

Have you ever been dismissed, suspended, placed on probation, or received other significant disciplinary sanction? No Yes

Have you ever withdrawn from school voluntarily for an extended period of time for reasons other than health? No Yes

Have you ever had significant social or emotional difficulties? No Yes

If "yes" to any of the above, please explain in detail and in your own words on an attached sheet.

Date of last physical	Height	Weight
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List any serious illnesses, operations, or accidents. Please include your approximate age at the time.

Present state of health

I certify that the information presented in my application is accurate, complete, and honestly presented. I also certify that, to the best of my knowledge, any information submitted on my behalf, including letters of recommendation, is authentic. I understand and agree that any intentionally inaccurate information, misleading information, or omission will, if discovered at a later date, be cause for rescission of any offer of admission or for dismissal from the school.

Signatures

Signature of Student	Date
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Signature of Parent1 or Guardian	Date
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Signature of Parent2 or Guardian	Date
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