

SCHOOL OF EDUCATION

DEPARTMENT OF HEALTH AND PHYSICAL ACTIVITY

**APPLICATION FOR UNDERGRADUATE ADMISSION
BACHELOR OF SCIENCE PROGRAM IN HEALTH AND PHYSICAL ACTIVITY**

All information on this form is private and confidential, will only be used internally, and will not be released to persons or institutions outside the University without your written consent.

Please print or type

_____ **Check One:** New Admit _____ Re-admit _____ Email: _____

Social Security Number
(Required if you intend to apply for Financial Aid)

_____ Last Name First Name M.I. Maiden Name

Local Address:

_____ Street Address

_____ City State Zip Phone

Permanent Address:

_____ Street Address

_____ City State Zip Phone

Are you a Citizen or Permanent Resident of the US? ___ Yes ___ No Country: _____

Your response to the following questions is voluntary, and will not be used to deny access or admission. They will however, assist the University in proving data to demonstrate compliance with federal regulations.

Race/Ethnicity: (optional)

___ Black
___ Asian/Pacific Islander
___ American Indian/Alaskan Native

Sex:

___ Hispanic
___ White
___ Male
___ Female

Date of Birth:

___/___/___
month/date/year

ACADEMIC PREPARATION – Academic work beyond high school in order of attendance

College or University Major # of Credits Earned

EMPLOYMENT RECORD – Two most recent positions. Begin with present or last position held.

Name and Location of Employer Position Date Worked

THE UNIVERSITY OF PITTSBURGH IS COMMITTED TO AFFIRMATIVE ACTION. THEREFORE, IF THERE ARE ASPECTS OF YOUR BACKGROUND WHICH YOU FEEL MERIT SPECIAL CONSIDERATION, PLEASE COMMENT ON AN ATTACHED SHEET OF PAPER.

PLEASE INDICATE SPECIALIZATION TO WHICH YOU ARE APPLYING:

Choose One:

Exercise Science _____ Wellness: _____
(select 1 option)
Aquatics _____
Aerobics _____
Fitness _____
Aerobics – Fitness _____

I attest that all information in this application is correct. I understand that action on the application cannot be taken until all transcripts and credentials are received.

Signature: _____ **Date:** _____

Procedures for Admission

DEADLINE: Applications are reviewed once a year. The deadline for admission into the Fall Term is Feb 1st.

ADMISSION MATERIALS MUST INCLUDE:

- 1) A completed School of Education Undergraduate Application for Health and Physical Activity
- 2) Current Official Transcript with a minimum of 45 credits earned with a 2.5 QPA or better
- 3) A statement of career goals and degree objectives
- 4) Two letters of recommendation
- 5) Final applicants will be contacted for an interview

ALL APPLICATION MATERIALS MUST BE SENT OR DROPPED OFF TO:

STUDENT SERVICE CENTER
5500 POSVAR HALL
PITTSBURGH, PA. 15260

*****If you are a student in CAS or CGS, make sure you fill out an UNDERGRADUATE PROGRAM CHANGE ALONG WITH THIS APPLICATION AND TAKE IT TO: 140 Thackeray Hall for CAS; 407 Cathedral of Learning for CGS in order for your academic folder to be sent to the School of Education Student Service Center to process your application.**

***** If transferring from another college or university, a University Undergraduate Application for Admission, together with a \$45.00 application fee (check can be made payable to the University of Pittsburgh and submitted directly to the Office of Admission and Financial Aid).**

The applicant should contact the person listed below to obtain specific program information.
Exercise Science or Wellness Dr. Elizabeth Nagle 412-648-8288 nagle@pitt.edu

Tuition and fee information can be obtained from <http://www.ir.pitt.edu/tuition/>

The applicant's name should be legible on every page of every document submitted.