RAMAPO COLLEGE OF NEW JERSEY

Office of Admissions
505 Ramapo Valley Road, Mahwah, NJ 07430-1680
Tel: (201) 684-7300, 7301 Fax: (201) 684-7964
www.ramapo.edu

Au Pair Program Application

Application deadline is September 3, 2009

Please type or print in ink:

Last name: _____ **First name:** _____ **Middle Initial:** _____

Social Security Number: _____ – _____ – _____ **R# (if assigned):** _____

Mailing Address:

Street Address-Line 1: _____

Street Address-Line 2: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: (_____)_____ **Day Telephone:** (_____)_____

Maiden or previous name if different from above: _____
Last First Middle

E-mail Address: _____

Date of Birth: _____ **Gender:** ☐ Male ☐ Female
Month-Day-Year

Au Pair Agency: _____ **Counselor's Name:** _____

Au Pair Telephone Number: (_____)_____

Country of Citizenship: _____ **Country of Birth:** _____

Dates of au pair program as indicated on your IAP-66: _____ **to** _____
Month-Day-Year Month-Day-Year

Racial/Ethnic Origin (*optional*):
☐ Asian or Pacific Islander ☐ Black, Non-Hispanic ☐ Hispanic ☐ White, Non-Hispanic

Area(s) of study/interest: _____

Anticipated enrollment term(s): ☐ Fall 2009 (September - December) ☐ Spring 2010 (January - May)

Have you previously attended Ramapo College? ☐ No ☐ Yes
Have you ever been convicted of a crime? ☐ No ☐ Yes **(If yes, please attach a statement of explanation.)**

Please list ALL School/Colleges/Universities attended:

College/University	Location	From month/year	To month/year	# of Credits or Degree

My signature below certifies that I fully understand all the policies pertaining to the Au Pair Program as outlined in the *Au Pair Program Guidelines*. My signature below further certifies that the information listed on this application is true and accurate, and should any of this information be fraudulent, I understand that it may be cause for dismissal.

Signature: _____ **Date:** _____