



LANDMARK  
COLLEGE

TAKE a DIFFERENT  
**path** to the top

# Application for Admission

Landmark College

River Road South • Putney, Vermont 05346

Tel: 802-387-6718 • Fax: 802-387-6868

[www.landmark.edu](http://www.landmark.edu)

# Help us get to know you.

**Let me begin by saying thanks for your interest in Landmark College.** As you probably already know, we're not like most other colleges, because our focus is exclusively on students who seek a different path as they pursue their baccalaureate degree.

Because we're committed to providing educational strategies and opportunities for students with learning disabilities, this application seeks information designed to help us get to know you as fully as possible.

In completing this application, remember that's our goal. While you'll see questions about grades and past performance, please know we recognize these factors may not be the best indication of your full potential. The Admissions Committee will be looking at your application from many perspectives to determine if Landmark is a "good fit" for you.

So grab a pen, relax and answer each section as openly as possible. Help us understand why coming to Landmark is the path you seek. If you have any questions or need assistance with some sections, please don't hesitate to call. We're here for you!

**Dale M. Herold**

Vice President, Enrollment Management

*P.S. To simplify things, we've provided a step-by-step check list for your reference. Freshman applicants should see page 1; transfer students should consult page 2.*

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## CHECK LIST FOR

# Freshman Applicants

**Landmark College follows a rolling admissions process. However, to be considered for priority enrollment, freshman applicants for the spring semester should apply by Dec. 1; applicants for the fall semester should apply by April 1. Use this helpful check list to ensure you provide the necessary information for a complete application.**

- A completed and signed application**
- \$75 application fee, made payable to Landmark College**  
*The fee is required unless you submit a fee waiver request.*
- Official high school transcript(s)**  
*Complete through seven semesters or the semester most recently completed. Transcripts of any summer school or college work must be submitted as well. Your final transcript is required prior to enrollment. Home-schooled students are reviewed on a case by case basis. Please submit supporting documentation of curriculum and certification. Note: IEP diplomas are rarely accepted.*
- Copy of GED (if applicable)**
- Cognitive testing (must have been administered within three years of applying)**  
*The Wechsler Adult Intelligence Scale III (WAIS III), Wechsler Intelligence Scale for Children (WISC) or the Woodcock Johnson Cognitive Test are acceptable. These tests are comprised of a series of standardized tests used to evaluate the cognitive and intellectual abilities of students. Complete scores including subtests are required to provide a comprehensive understanding of the applicant.*
- Nelson-Denny reading scores (must have been administered within one year of applying)**  
*Gives a three-dimensional picture of your reading abilities by measuring your vocabulary development, reading comprehension and reading rate. If you have questions about this test or need assistance in locating a test administrator call Landmarks Office of Admissions at 802-387-6718.*
- Diagnosis of a learning disability or AD/HD (must have been diagnosed within three years of applying)**  
*Current diagnosis of a learning disability or AD/HD by a professional is a requirement for admission to Landmark College.*
- Guidance counselor recommendation**
- Teacher recommendation**  
*This should be completed by a teacher in an academic subject who knows you well. You may submit additional recommendations from teachers.*
- Personal statement**

### **OPTIONAL**

- SAT/ACT scores**  
*We do not place heavy emphasis on the SAT or ACT scores, but we do find that they add to our understanding of the applicant.*

### **INTERNATIONAL STUDENTS**

- TOEFL**  
*Applicants for whom English is not their first language must submit scores from the Test of English as a Foreign Language (TOEFL).*

### **FINANCIAL AID DEADLINES**

*The priority financial aid deadline for completed applications is March 30. To be considered for financial aid at Landmark College, you must submit the following:*

- FAFSA**  
*Free Application for Federal Student Aid (available online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov))*
- Landmark College Financial Aid Application** (available online at [www.landmark.edu](http://www.landmark.edu))

## CHECK LIST FOR

# Transfer Applicants

**Landmark College follows a rolling admissions process. However, to be considered for priority enrollment, transfer applicants for the spring semester should apply by Dec. 1; transfer applicants for the fall semester should apply by June 1. Use this helpful check list to ensure you provide the necessary information for a complete application.**

- The completed and signed application**
- \$75 application fee, made payable to Landmark College**  
*The fee is required unless you submit a fee waiver request.*
- Official transcripts of all college work**
- Official final high school transcript(s)**  
*Home schooled students are reviewed on a case by case basis. Please submit supporting documentation of curriculum and certification. Note: IEP diplomas are rarely accepted.*
- Copy of GED (if applicable)**
- Cognitive testing (must have been administered within three years of applying)**  
*The Wechsler Adult Intelligence Scale III (WAIS III), Wechsler Intelligence Test for Children (WISC) or the Woodcock Johnson Cognitive Test are acceptable. These tests are comprised of a series of standardized tests used to evaluate the cognitive and intellectual abilities of students. Complete scores including subtests are required to provide a comprehensive understanding of the applicant.*
- Nelson-Denny reading scores (must have been administered within one year of applying)**  
*Gives a three-dimensional picture of your reading abilities by measuring your vocabulary development, reading comprehension and reading rate. If you have questions about this test or need assistance in locating a test administrator call Landmarks Office of Admissions at 802-387-6718.*
- Diagnosis of a learning disability or AD/HD (must have been diagnosed within three years of applying)**  
*Current diagnosis of a learning disability or AD/HD by a professional is a requirement for admission to Landmark College.*
- Dean's report**
- Teacher recommendation (high school or college)**
- Personal statement**

### **OPTIONAL**

- Professor recommendation**
- SAT/ACT**  
*We do not place heavy emphasis on the SAT or ACT scores, but we do find that they add to our understanding of the applicant.*

### **INTERNATIONAL STUDENTS**

- TOEFL**  
*Applicants for whom English is not their first language must submit scores from the Test of English as a Foreign Language (TOEFL).*

### **FINANCIAL AID**

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**2**

- Landmark College Financial Aid Application** (available online at [www.landmark.edu](http://www.landmark.edu))



**LANDMARK**  
COLLEGE

Office Use Only		
PMT	DATE	AMT
_____	_____	_____

# Application for Admission

**Please answer all questions completely. Please print or type clearly.**

**TODAY'S DATE** \_\_\_\_\_  
Month/Day/Year

I am applying for:

- Fall Semester 20\_\_\_\_
- Spring Semester 20\_\_\_\_

## ABOUT YOU

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cellular Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Primary E-mail Address \_\_\_\_\_

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender  M  F

What is your intended area of study at Landmark?  Business Studies  Liberal Arts

Have you previously applied to Landmark College?  Yes  No

If yes, when: \_\_\_\_\_

Have you previously attended Landmark College (including summer programs)?  Yes  No

If yes, when: \_\_\_\_\_

Are you a U.S. citizen?  Yes  No

If no, what is your country of citizenship? \_\_\_\_\_

If other than a U.S. citizen, please give citizenship status and visa needs: \_\_\_\_\_

Primary language that you speak: \_\_\_\_\_

Other language(s) that are or were regularly spoken in your home: \_\_\_\_\_

(continued)

## ABOUT YOUR EDUCATION

Please list below the high schools you have attended or are attending (most recent first):

Name of High School(s)	City & State	Dates of Attendance (From/To) Mo/Yr	Date or Expected Date of Graduation
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

Name of Guidance Counselor \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Have you taken the SAT or ACT?  Yes  No If yes, when? \_\_\_\_\_ Month/Year \_\_\_\_\_ Month/Year

If yes, what were your scores: SAT Verbal \_\_\_\_\_ SAT Math \_\_\_\_\_ ACT \_\_\_\_\_

If no, do you plan to take the SAT or ACT?  Yes  No If yes, when? \_\_\_\_\_ Month/Year

## TRANSFER CANDIDATES ONLY

Transfer candidates must list ALL colleges/universities, including Landmark College, previously or presently attended/attending (most recent first):

Name of College(s)	City & State of College(s)	Dates of Attendance (From/To) Mo/Yr	Date or Expected Date of Degree	Part-Time or Full-Time
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____

If you are presently enrolled, please indicate how many credits you are currently taking: \_\_\_\_\_

Reasons for transferring to Landmark College: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ADDITIONAL INFORMATION (optional)

I would like to be identified as a member of the following ethnic group:

- American Indian or Alaskan Native     Asian     Black, African-American  
 Hispanic or Latino     White     Other \_\_\_\_\_  
 Native Hawaiian or Other Pacific Islander

I am a member of the following religious denomination: \_\_\_\_\_

Who or what led you to apply to Landmark College? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any other colleges to which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you plan to apply for financial assistance?  Yes  No

If you have not been enrolled in a college or high school for the past six months, please indicate how you have spent your time (i.e., travel, work, military service): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list your employment history (*most recent first*):

Employer	Position or Duties	Dates Employed: From/To	Hours per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been suspended or expelled from school?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(continued)

**YOUR INTERESTS AND ACTIVITIES**

Academic interests:

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Areas of participation in High School:

- Band     Choir     Drama     Student Government     Publications     Art

Clubs (list) \_\_\_\_\_  
\_\_\_\_\_

Sports (list) \_\_\_\_\_  
\_\_\_\_\_

Other (list) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Areas of participation in community service:

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Do you have tentative career goals or plans for your future? If so, what are they?

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**ABOUT YOUR FAMILY**

**Father's/Guardian's Name** \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Cellular Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Fax No. (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Work Mailing Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Mother's/Guardian's Name** \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Cellular Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Fax No. (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Work Mailing Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Stepparent's/Guardian's Name** \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Cellular Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Fax No. (\_\_\_\_) \_\_\_\_\_-\_\_\_\_

Work Mailing Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

If you do not live with both parents, with whom do you reside permanently?

\_\_\_\_\_  
Name Relationship

Please list names and ages of your brothers and sisters, and colleges attended, if any.

\_\_\_\_\_

\_\_\_\_\_

(continued)

By applying to Landmark College and signing this application for admission, I indicate my understanding that Landmark offers an intensive, rigorous academic program focused on the liberal arts. The college provides extensive academic and student services designed to help students achieve academically, within a residential environment typical of that of a small liberal arts college.

I understand that classes, including workshops and office hours, meet for up to six hours per week, and to succeed in the program, I must be prepared to attend class meetings and do up to three hours of coursework per night. I recognize that students who are motivated to meet Landmark's high standards and expectations generally succeed academically and are able to transfer to baccalaureate degree programs of their choosing. I also understand that students not prepared to work in an intensive academic environment, or who may have issues secondary to academic performance that require their focus, may have difficulty achieving the learning outcomes of the program.

***My signature below indicates that the information in my application is correct and honestly presented.***

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Landmark College admits students of any race, color, and national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of color, gender, national and ethnic origin, or sexual orientation in the administration of its educational policies, scholarship and loan programs, and athletic and other college-administered programs.

***Mail completed form to:***

Landmark College, Office of Admissions, PO Box 820, Putney, VT 05346



4) Describe a situation in which you had to advocate for your needs as an individual with a learning disability or AD/HD.

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5) How does an associate degree from Landmark College fit into your long-term academic and career goals?

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6) Describe a teacher who made a difference in your academic life.

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7) In what ways do you hope to contribute to the Landmark College community?

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**Mail completed form to:**

Landmark College, Office of Admissions, PO Box 820, Putney, VT 05346



## **2. GUIDANCE COUNSELOR INSTRUCTIONS**

The below-named student is applying for admission to Landmark College. To better evaluate our applicants, a full and candid report from the student's school is essential. We ask for carefully considered ratings and comments about the academic background, character and ability of the applicant by a school official who knows this student well.

Please complete and return this form as soon as possible. We cannot complete this applicant's evaluation without this form.

### **Guidance Counselor Information Section (to be completed by the guidance counselor)**

Student's Name \_\_\_\_\_

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

Title \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address \_\_\_\_\_

SAT/ACT School Code Number \_\_\_\_\_

### **Official Transcripts**

Please attach an official transcript to this report. The transcript should provide information about the student's courses, when they were taken, grades received, courses failed or repeated, courses in progress, honors, accelerated and Advanced Placement courses or sections, a brief explanation of your grading scale, test results (such as PSAT, NMSQT, SAT and ACT), class rank and cumulative GPA.

This student's class rank is \_\_\_\_\_ out of \_\_\_\_\_ students.

Our school does not rank students.

This student's cumulative grade point average is \_\_\_\_\_ on a \_\_\_\_\_ scale.

GPA is  Weighted  Unweighted

This student's course selection in comparison to other students planning to participate in post-secondary education is:

Most demanding  Very demanding  Demanding  Average  Not demanding

Student's date or expected date of graduation: \_\_\_\_\_

**Please rate this student realistically in comparison with your other post-secondary students.**

	Truly Outstanding	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Personal characteristics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic self discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect accorded to faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect accorded to peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student for studies at Landmark College:

Enthusiastically   
  Strongly   
  Fairly strongly   
  With reservation   
  Do not recommend

Counselor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Mail completed form with a copy of the applicant's official high school transcript to:**

Landmark College, Office of Admissions, PO Box 820, Putney, VT 05346





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# Teacher Recommendation

## 1. STUDENT INSTRUCTIONS

Please fill out the top of this form and then give the form directly to a teacher of your choosing. One teacher reference is needed for a complete application. Select a teacher who knows you well at this time in your school studies. The referring teacher should return the completed form directly to Landmark College.

Name of Student \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Last

Name of Teacher \_\_\_\_\_

## 2. INSTRUCTIONS FOR THE RECOMMENDING TEACHER

The above-named student has applied to Landmark College. Landmark College is the nation's premier accredited college designed exclusively for students of average to superior intellectual potential who have dyslexia, AD/HD, or specific learning disabilities. Please write a description of the candidate. Include your thoughts about his/her motivation, academic performance, honesty, ability to set realistic goals, interpersonal skills, sense of humor, and any other observations relevant to his/her performance in a college setting. In addition, because of the specialized nature of our program, any information that would help us to respond successfully to the student's learning needs is especially helpful.

Please use the reverse side of this form for your comments or attach your recommendation letter to this form.

### **Confidentiality Policy**

Your effort to realistically assess the potential of this candidate is greatly appreciated. This form or your recommendation letter will become part of the student's permanent file.

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Years Acquainted with Student \_\_\_\_\_

School Address \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

***We appreciate your taking the time to complete this evaluation. It will greatly aid the Admissions Committee.***





**2. INSTRUCTIONS FOR THE DEAN OF STUDENTS**

Landmark College is the nation’s premier accredited college designed exclusively for students of average to superior intellectual potential who have dyslexia, AD/HD, or specific learning disabilities. Your assistance is needed in providing an academic profile for this candidate for admission. Please complete this form. If needed, attach additional sheets.

A) Is this student in good academic standing?  Yes  No

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B) Does this student have a record of any personal difficulties while at your institution?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C) If this student achieves sufficient academic progress, would you consider them for readmission?  Yes  No

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D) I recommend this student for studies at Landmark College:

Enthusiastically     Strongly     Fairly strongly     With reservation     Do not recommend

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

Telephone (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_

E-mail Address \_\_\_\_\_

**Please complete and return this form to:**

Landmark College, Office of Admissions, PO Box 820, Putney, VT 05346

**QUESTIONS**

Please call **802-387-6718**

**We appreciate your taking the time to complete this evaluation. It will greatly aid the Admissions Committee.**