

Scholar Credit Initiative Program (SCIP) | APPLICATION

PLEASE PRINT | FIELDS IN RED ARE REQUIRED

PERSONAL INFORMATION: First Name: ____ _____ Middle Name: _____ Last Name: Preferred Name: Date of Birth (MM/DD/YY): ____/ ___ Social Security Number: _____ Gender: ☐ Male ☐ Female Country of Citizenship: ______ **CONTACT INFORMATION:** Landline Phone: Cell Phone: Student Email Address: How would you like to be contacted? Please choose more than one option: ☐ Text ☐ Cell ☐ Home Phone ☐ Email PREFERRED MAILING ADDRESS: Street Address: City: _____ State: ____ ZIP Code: ____ PERMANENT ADDRESS (if different from mailing address): Street Address: ____ State: ZIP Code: APPLICATION INFORMATION: I plan to begin taking classes: ☐ FALL ____ ☐ SPRING ____ YEAR I plan to take classes: ☐ On campus ☐ Online ☐ Both Course(s) you are interested in taking at La Roche: _____ Name of high school currently attending: _____ Expected date of high school graduation: Month: _____ Year: ____ Have you applied for admission to La Roche University as a degree-seeking student? ☐ Yes ☐ No PARENT/GUARDIAN/FAMILY INFORMATION: ______ Relationship: __ Relationship: ___ Street Address: _ _____ Street Address: _ (If different from Mailing/Permanent Address above) (If different from Mailing/Permanent Address above) City, State, ZIP code: ______ City, State, ZIP code: _____ Email Address: _____ Email Address: ____ Cell Phone: Cell Phone: **VOLUNTARY INFORMATION:** How would you describe yourself? Ethnicity: Hispanic/Latino of any origin (Spanish, Mexican, Puerto Rican, etc.) ☐ Yes ☐ No Please select from one or more of the following: □ American Indian/Alaskan native □ Asian-American ☐ Black or African-American ☐ Native Hawaiian or Other Pacific Islander ☐ White



semester they would like to attend online or

APPLICATION REQUIREMENTS: In addition to this application, you must

demonstrate a GPA of 3.0 or greater and sophomore, junior

a.) A high school/home school transcript. The transcript must

or senior standing at the time of application.

b.) A letter of recommendation from your high school guidance counselor. Home-schooled students are permitted to send a letter of recommendation from a parent or an adult who has known the student in an advisory capacity within a club, church, formal organization or

on-campus courses.

submit the following:

other activity.

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Have you taken AP classes or IB college credits while enrolled in high school? ☐ Yes ☐ No	classes in both the online and on-campus format. Books are not included in the per-credit hour costs. Parking is free for commuters. Late payment fees do apply. Financial aid is not available to non-
Have you taken other college courses while enrolled in	degree students.
high school? Yes No If Yes, which courses and which college?	TERMS: SCIP students may take up to a maximum of 15 credit hours at La Roche University. Students will be counseled regarding appropriate coursework by Student Academic Support Services.
	SCIP courses may be taken in Fall and Spring only.
	Acceptance as a SCIP (non-degree) student does not guarantee availability of courses nor does it guarantee regular acceptance as a degree-seeking student.
Self-Reported GPA:(High school transcripts are still required with application.)	A minimum grade of C or better must be earned on each course taken at La Roche University to continue eligibility for SCIP while in high school.
Are either of your parents a full-time La Roche University employee? ☐ Yes ☐ No	SCIP students are required to determine whether or not courses taken at La Roche University will transfer to other institutions. La Roche University is not responsible for determining applicability of transfer credit or college credit to high school credit.
Parent Name: First Last	La Roche University reserves the right to change or cancel courses. After SCIP students are officially registered for a course and receive their personal username and password, they can visit the
How did you hear about SCIP?	My.LaRoche.edu section at our website to confirm the location, date and time of their courses prior to the first day. ALL DOCUMENTS SHOULD BE MAILED TO:
	La Roche University
	Office of Freshman Admissions
Have you been dismissed or suspended from high school for	9000 Babcock Boulevard
any reason? ☐ Yes ☐ No	Pittsburgh, PA 15237
ADDITIONAL NOTES:	_
	TO CONTACT THE FRESHMAN ADMISSIONS OFFICE:
	EMAIL: admissions@laroche.edu
	• FAX: 412-847-1820
	• PHONE: 412-536-1272 or 844-838-4578
	WEBSITE: laroche.edu
APPLICATION INSTRUCTIONS:	
WHEN TO APPLY: High school sophomores, juniors and seniors should apply at least two months prior to the beginning of the	

NON-DISCRIMINATION POLICY

La Roche University does not discriminate on the basis of race, color, national origin, sex, disability, age, or religion in its programs and activities. The following persons have been designated to handle inquiries regarding the non-discrimination policies: Vice President for Student Life & Dean of Students - 412-536-1069 | Assistant Director of Accessibility & Equity - 412-536-1177 | Associate Vice President for Human Resources - 412-536-1115. For further information on notice of non-discrimination, call 1-800-421-3481.