

SARATOGA FELLOWS PROGRAM APPLICATION

GENERAL REQUIREMENTS

- Applicant must embrace the Christian faith in its Catholic, Orthodox or Protestant expression.
- Applicant must be a college graduate by the time of enrollment at the John Jay Institute.
- Applicant must have an undergraduate G.P.A. of 3.0 or better on a 4.0 scale.
- Applicant must hold a commission in the United States Armed Forces.

INSTRUCTIONS

Complete this application form (please type or print), making sure to provide all required information including essays and curriculum vita/resume, and mail to: Saratoga Fellows Program, The John Jay Institute, 705 S. Bellevue Ave., Langhorne, Pennsylvania 19047. The following items may accompany the application or be mailed separately:

Official College/University Transcripts 3 Letters of Reference Writing Sample

Before you can be considered for admission to the program, all of the materials must be postmarked by the application deadline for the desired term.

PERSONAL INFORMATION

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APPLICANT'S FULL NAME	PREFERRED NAME		SEX
ADDRESS AT SCHOOL			
CITY / STATE / ZIP CODE			
TELEPHONE NUMBER	CELLULAR TELEPHONE NUMBER	EMAIL ADDRESS	
PERMANENT ADDRESS (HOME)			
CITY / STATE / ZIP CODE			
PERMANENT TELEPHONE NUMBER			
HOMETOWN NEWSPAPER		CITIZEN OF WHAT COUNTR	Y?
DATE OF BIRTH (MONTH/DAY/YEAR)		PLACE OF BIRTH	
Do you have any physical limitation	ons or special medical requirements?	☐ No ☐ Yes If so, pleas	e explain:

MARITAL STATUS	SPC	USE'S NAME (IF APPLICABLE)	
FATHER'S NAME			
ADDRESS			
CITY / STATE / ZIP CODE			
CELL PHONE	номе рног	NE	EMAIL
MOTHER'S NAME			
ADDRESS (IF DIFFERENT FROM	1 FATHER'S ADDRESS)		
CITY / STATE / ZIP CODE			
CELL PHONE	HOME PHON	TE .	EMAIL
EMERGENCY CONTA	VCT.		
EMERGENCY CONTA			
NAME	REI	ATION	
ADDRESS			
CITY / STATE / ZIP CODE			
OFFICE PHONE	HOME PHON	E	CELL PHONE
ENROLLMENT INFO	RMATION		
APPLICATION IS FOR: (CHECK	ONE) Summer 20		
COLLEGE/UNIVERSITY ATTENI	DED		
DATE OF GRADUATION			
DEGREE	MĄ	JOR(S)	MINOR(S)
MILITARY BRANCH	RANK	DATE OF COMMISSION	OCCUPATIONAL SPECIALTY
GRADUATE STUDIES (IF ANY IN	NDICATE SCHOOL AND FIEL	D OF STUDY)	
		, 	
Describe your extracurricul	lar involvement in stude	nt activities (student gover	nment, campus newspaper, sports,
academic and professional	traternities, etc.):		

FAMILY INFORMATION

Describe your most distinguished honors, awards, and achievements:
OPTIONAL ENROLLMENT DATA (for statistical reporting purposes only)
RELIGIOUS AFFILIATION
RACE/ETHNICITY
How did you learn about the Saratoga Fellows Program?

ESSAY QUESTIONS

Please type your responses on a separate paper. Answer each question in a 500-600 word essay.

- 1. Describe your spiritual pilgrimage. Discuss your relationship with God; specifically, how does this relationship influence your daily life, including your academic and professional goals?
- 2. During your adult life what three books (besides the Bible) have had the greatest effect on your life? Why and how so?
- 3. Explain your desire to participate in the Saratoga Fellows Program. How would this experience relate to your future plans for graduate/professional school and your personal and professional goals?
- 4. What is your calling (life-purpose or life-task)? What burning passion has God placed on your heart to do for him in this life? What is the desire of your soul with respect to serving God now and in the future?

WRITING SAMPLE

Please submit a copy of a paper submitted for college/university coursework (10-page maximum).

CURRICULUM VITA / RESUME

Please submit an updated curriculm vita or resume.

I certify that all of the information provided above is true and correct to the best of my knowledge.

Furthermore, I understand that if enrolled in the Saratoga Fellows Program, I will be participating in a community of scholars who desire to live, learn and practice our faith in God. I will seek to make my faith and trust in God and his divine will for my life central to all that I do. I will endeavor to love God with my body, soul, and mind, conduct my life in accordance with the teachings of Holy Scripture, and submit myself to self-scrutiny and willing correction within the faith community of the John Jay Institute.

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APPLICANT'S SIGNATURE

DATE



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CANDIDATE EVALUATION

To:		
	PERSON COMPLETING THE EVALUATION	
Candida	didate:	
	APPLICANT'S NAME	

Thank you for taking the time to write a recommendation for the above applicant to the Saratoga Fellows Program. Your candid and specific responses to the questions below will greatly assist the selection committee in choosing 12 military officers who will study American ideals and institutions in residency at the John Jay Institute for 6 weeks. Please provide a narrative that answers the following questions (on your office letterhead, if appropriate) and include your daytime telephone number. Please sign and date your evaluation, place it in a sealed envelope, sign your name over the seal, and return the envelope to the applicant or mail it directly to:

Saratoga Fellows Program The John Jay Institute 705 S. Bellevue Ave Langhorne, Pennsylvania 19047

- 1. How long have you known the applicant?
- 2. What are the applicant's major strengths? Please relate an occasion in which these strengths were demonstrated.
- 3. What are the applicant's weaknesses?
- 4. What has the applicant done that you consider creative?
- 5. How would you describe the candidate's writing ability?
- 6. How would you describe the candidate's intellectual ability?
- 7. How would you describe the candidate's public speaking ability?
- 8. How would you describe the candidate's personal integrity?
- 9. How would you describe the candidate's consensus-building, negotiating and leadership skills?
- 10. What do you expect this candidate to be doing in 15 to 20 years?