

SPRINGFIELD COLLEGE

The Freshman Signature Page

Statement of Understanding:

I hereby give permission to Springfield College to use, in publications, press releases, and other promotions, my name and any photograph or video footage in which I may appear.

I understand that falsification of any information on this application and its credentials will make me ineligible for admission or subject to later separation if enrollment is affected.

Print Name: _____

Signature: _____

Date: _____

Parent's or Guardian's Signature: _____

Date: _____

(Unless candidate is 18 years of age or over)

This application is incomplete unless signed.

Please return your completed application and a **\$50** application fee to:

Springfield College
Office of Admissions
263 Alden Street
Springfield, MA 01109-3797