

return by March 15 to:

Sponsored by Bryn Mawr College/Higher Education Resource Services (HERS)

**SUMMER INSTITUTE  
FOR WOMEN IN  
HIGHER EDUCATION  
ADMINISTRATION**

**APPLICATION FOR ADMISSION**

**Note to Applicants:** If you are admitted to the Summer Institute, this page will be reproduced for use by all participants as part of the Professional Development component.

Bryn Mawr College  
101 North Merion Avenue  
Bryn Mawr, Pennsylvania 19010-2899

**I. Personal**

NAME

HOME ADDRESS

HOME TELEPHONE DATE OF BIRTH

**II. Profession**

TITLE OR POSITION

INSTITUTION TOTAL ENROLLMENT

TYPE OF INSTITUTION

- |           |            |                   |                  |
|-----------|------------|-------------------|------------------|
| 1. Public | 3. Private | 5. Church Related | 7. System Office |
| 2. 2-year | 4. 4-year  | 6. University     | 8. Other         |

ADDRESS

OFFICE TELEPHONE E-MAIL ADDRESS

FAX NUMBER DATE APPOINTED TO PRESENT POSITION

TITLE OF PERSON TO WHOM YOU REPORT

PRIMARY RESPONSIBILITY (check one)

- |                  |                     |                     |                            |
|------------------|---------------------|---------------------|----------------------------|
| 1. Faculty       | 3. Business/Finance | 5. Academic Affairs | 7. Library                 |
| 2. Chief Officer | 4. External Affairs | 6. Student Services | 8. Administrative Services |

DESCRIBE BRIEFLY YOUR RESPONSIBILITIES

**III. Education** (List highest degree first)

College or University	Degree	Field	Date
-----------------------	--------	-------	------

**IV. Professional History** (List most recent positions first)

Title	Institution	Dates	Full or Part Time
-------	-------------	-------	-------------------

from to

from to

**V. Professional Activity**

Publications

---

---

---

---

---

Professional committees and boards on which you have actively served and/or held office

---

---

---

---

---

Awards/honors

---

---

---

---

---

**VI. Interests and Activities Other Than Professional: Civic, Community, Recreational, and Other**

---

---

---

---

---

---

---

**VII. Funding**

Please indicate sources of funding, should you be selected to participate in the Summer Institute. Check probable sources and percentages.

100% Institution

50-99% Institution

1-49% Institution

100% Other Source (such as religious order or foundation)

50-99% Other Source

1-49% Other Source

100% Self

50-99% Self

1-49% Self

**VIII. Supplementary Information**

- a. a current resume
- b. an organizational chart from your institution indicating your position. If you work at a large university, you may submit the portion of the organizational chart appropriate to your position. If you are admitted to the program, this will be reproduced for participants' use as part of the Professional Development component.
- c. a self-descriptive letter that:
  - 1. identifies your immediate professional objective;
  - 2. identifies what you consider to be your own special strengths;
  - 3. identifies the problems, if any, which you feel might affect your professional development;
  - 4. describes the path you would like your career to take, including a specific projection of where you see yourself, or would like to see yourself, in five years (be as concrete as possible);
  - 5. outlines the ways in which you think attendance at the Summer Institute will help you achieve your objectives.

**IX. References**

A reference from the president or chief executive officer of your institution is required and should be submitted by March 15.

President or Chief Executive Officer:

---

NAME OFFICIAL TITLE

And, in addition, one other written reference.

---

NAME OFFICIAL TITLE

---

INSTITUTION

**X. Contact in Case of Emergency**

---

NAME

---

ADDRESS

---

---

TELEPHONE

RELATIONSHIP

**XI. Application for**

Residential Participation  
(fees will be \$6800 which includes tuition, room, board, instructional materials,  
and computer time, payable by June 1.)

Non-Residential Participation  
(fees will be \$5800 which includes tuition, instructional materials, computer time,  
and lunch and dinner when classes are scheduled, payable by June 1.)

send completed form with application fee of \$75 (non-refundable)  
by March 15 to:

BRYN MAWR COLLEGE/HERS  
SUMMER INSTITUTE  
FOR WOMEN IN  
HIGHER EDUCATION  
ADMINISTRATION  
Bryn Mawr College  
101 N. Merion Avenue  
Bryn Mawr, PA 19010-2899

Fax: 610/526-7327  
Email: [lzernick@brynmawr.edu](mailto:lzernick@brynmawr.edu)