

WESTMINSTER CHOIR COLLEGE OF RIDER UNIVERSITY
Orientation Preference and Reply Sheet

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Student Name: _____

Phone Number: _____

Mailing Address: _____

Email Address: _____

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SUMMER ORIENTATION

Orientation Dates: **June 22/23, July 13/14, July 27/28**

Each new undergraduate student should plan on attending one of these sessions. All students must return this preference sheet in order to insure a spot is reserved for you.

Please rank 1-3 the following sessions in terms of your attendance preferences:

___ **June 22/23**

___ **July 13/14**

___ **July 27/28**

Orientation Time: For students & family members staying overnight check-in is at 1:30 PM in the Bart Luedeke Center

For students & family members not staying overnight check-in is at 2:00 PM in the Bart Luedeke Center

Will any family members be attending this two-day session with you? ___ YES ___ NO

If yes, how many family members will attend (2 maximum): _____

Will you and your family members be staying overnight? ___ YES ___ NO

If yes, how many will be staying overnight (Please include yourself in total): _____

Do you have any special dietary needs? If yes, please describe here:

Since the Orientation sessions are on both of our campuses, will you need transportation between Rider's Lawrenceville and Princeton campuses on Monday morning, which are located 6 miles apart?

___ YES, I will need transportation

___ NO, I will be able to drive myself or with my family to Princeton

Are/ were you able to make the May 19th Testing Day? ___ YES ___ NO

(Please know that if you are/ were not able to make the May Testing Day, you will have to make-up some of your placement testing during your summer session and in fall when you return to campus. Math and Reading testing will occur on Sunday morning before Orientation begins on the Lawrenceville campus, and is a requirement based on your SAT scores. You will receive a notice from the Academic Support office if you are required to attend, with more detailed information. Not being able to make the May Testing Day will require your course registration to be delayed until the Fall.)

Please sign and return this sheet by fax or through the mail at the address below. You may want to make a copy of this sheet for your records. It is imperative that you arrive on time so that you get the full benefit of the program.

Signature of Student: _____ Date: _____

Please return this form to the Office of the Associate Dean of Students by fax to: (609) 252-0477, or

By mail to:
Office of the Associate Dean of Students
101 Walnut Lane
Princeton, NJ 08540

