



QuestBridge Application Supplement Freshman Admission 2016

The preferred method of application submission is via your **Rice Admission Student Portal** using the Upload Materials tool. If submission via your Student Portal is not an option, email your form to riceapps@rice.edu or mail your form to Rice Office of Admission - MS 17 - P.O. Box 1892 • Houston, Texas 77251-1892.

(Please type or print in ink.)

1. Name _____
Last First Middle (Complete) Preferred/Nickname

2. QuestBridge ID Number _____ 3. Birth Date _____
mm/dd/yyyy

4. Are you willing to receive text messages? Yes. Mobile phone number _____ No

5. Country of citizenship: _____ If not a U.S. citizen, are you a permanent resident of the U.S.?

Yes *(Attach copy of permanent residency card)*

No *(Visa type: _____)*

6. If you are a U.S. citizen or permanent resident living outside the U.S., how long have you lived outside the U.S.? _____

7. Are any of your parents/guardians employed by: (Check all that apply)

Austin College (TX) Marathon Oil Rice University (TX) Trinity University (TX)

Employee name(s)

Relationship: Mother Father Stepmother Stepfather Guardian

8. List any relatives who have attended Rice in an undergraduate or graduate degree program. Select from the following relationships: father, mother, grandfather, grandmother, stepfather, stepmother, sibling, uncle, and aunt. Include years of attendance, graduation dates, and degree(s) received, as appropriate.

Relationship	First Name	Last Name	Current Student or Alumnus(a)	Years of Attendance <small>(yyyy-yyyy)</small>	Graduation Year <small>(yyyy)</small>	Rice Degree(s) Received <small>(ex. BA, MS, PhD)</small>

9. Do you have a sibling also applying to Rice this year? Yes. Sibling name _____ No

If so, are you a twin? Yes No

10. Are you applying to the Rice/Baylor College of Medicine Medical Scholars Program*?

Check one: Yes No

***QuestBridge Students must submit the the Rice QuestBridge Application Supplement, the QuestBridge Decision Plan Verification Form, and the Rice/Baylor Medical Scholars Application to Rice no later than DECEMBER 1 to be considered for this program.**

(Please photocopy for your records before sending.)

Name _____ Birth Date _____
Last First mm/dd/yyyy

15. List the courses in your senior schedule and identify any Advanced Placement courses, honors courses, or IB courses.

First semester/trimester	Second semester/trimester	Third trimester

16. List up to five languages you know and indicate your proficiency level(s) in each:

Language	Language Proficiency				
	First Language	Speak	Read	Write	Spoken at Home
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. If you have attended more than one secondary school, please explain why in each case.

18. On a separate sheet, please account for any periods (except summers) that you were not enrolled in school.

19. If you have applied or expect to apply to other colleges or universities this year, please name them. (50 word limit)

20. How did you first learn about Rice University and what motivated you to apply? (200 word limit)

(Please photocopy for your records before sending.)

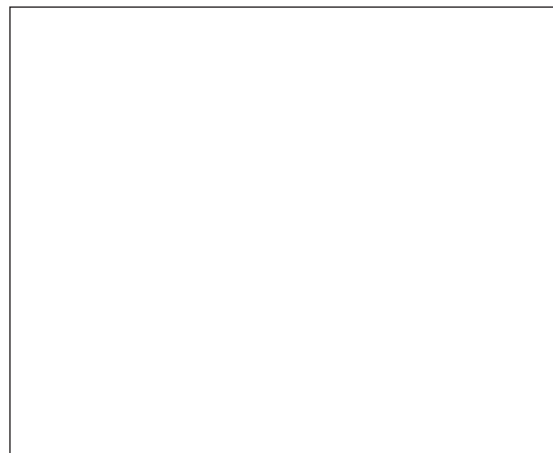
Name		Birth Date
_____	_____	_____
Last	First	mm/dd/yyyy

21. What contacts have you had with Rice? (Check all that apply)

- On-campus Information Session** Date _____ (mm/yyyy)
- On-campus Engineering Information Session** Date _____ (mm/yyyy)
- Campus Tour** Date _____ (mm/yyyy)
- On-campus Overnight Visit** Date _____ (mm/yyyy)
- On-campus Class Visit** Date _____ (mm/yyyy)
- On-campus Lunch Visit** Date _____ (mm/yyyy)
- On-campus Open House (Explore Rice or Discover Rice)** Date _____ (mm/yyyy)
- High School Visit with a Rice Representative** Date _____ (mm/yyyy)
- College Fair** Date _____ (mm/yyyy)
- Off-campus Information Session** Date _____ (mm/yyyy)
- Online Chat** Date _____ (mm/yyyy)
- Interview** Name _____ Date _____ (mm/yyyy)
- Rice Alumni/ae** Name _____
- Rice Student** Name _____
- Rice Faculty** Name _____
- Rice Staff** Name _____
- Rice Coach** Name _____

22. *Architecture applicants are required to provide answers to the following questions.* 1) What aspirations, experiences, or relationships have motivated you to pursue the study of architecture? 2) Outside of academics, what do you enjoy most or find most challenging? Responses to each question should be approximately one page.

23. **In keeping with Rice's long-standing tradition (known as "The Box"), please share an image of something that appeals to you.** Your response must be a two-dimensional, scannable image.



24. I certify that the information provided on this application is accurate and complete and acknowledge that any omission or inaccurate information could jeopardize my standing with the university. I declare that all essays and responses submitted are my own work. I further certify that I will, if admitted, abide by and support the Honor System at Rice University.

Printed Name _____

Signature _____ Date _____

mm/dd/yyyy

Rice University is committed to affirmative action and equal opportunity in education and employment. Rice does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity, national or ethnic origin, age, disability or veteran status.