



ST. JOHN'S
UNIVERSITY

New Student Guide to Enrollment and Orientation

FALL 2015

REGISTRATION BEGINS NOW





Ready to make the world a better place?

(You'll need to fill out a few forms first.)

It's time to take the next step on your path to success—your undergraduate career at St. John's University.

This is your official package preparing you for your fall semester. If you're planning to live on campus, be sure to download our *New Student Guide to Campus Living* and submit the housing application, which is available on our New Student landing page at stjohns.edu/newstudent. Freshmen must also complete the housing questionnaire.

Find the statement below that best describes you. Follow the instructions. **ONLY fill out the forms that apply to you.** By state or institutional mandate, all new students are required to complete medical, immunization, physical exam, and meningitis awareness forms. Students who fail to submit these forms will not be able to matriculate at St. John's.

"I am a new freshman."

Please read, complete, and return the following forms:

- Final high school transcripts, including final grades, and date of graduation
- Academic honor pledge
- Medical records, physical examination, and immunization forms
- Meningitis form
- Register for Orientation via the web at stjohns.edu/orientation
- Deposited resident students: Access Housing Portal to sign housing agreement, submit profile, and select roommates and room. (Refer to *New Student Guide to Residence Life* for instructions and deadlines.)

"I am a new transfer student."

Please read, complete, and return the following forms:

- Final high school transcripts, including grades, and date of graduation (for those who do not have an associate degree)
- Final college transcripts, including final grades
- Academic honor pledge
- Medical records, physical examination, and immunization forms
- Meningitis form
- Register for Orientation via the web at stjohns.edu/orientation
- Deposited resident students: Access Housing Portal to sign housing agreement, submit profile, and select roommates and room. (Refer to *New Student Guide to Residence Life* for instructions and deadlines.)

Please fill out all forms that apply to you and return the forms. Also, please remember to register for Student Orientation by visiting us online at stjohns.edu/orientation, (click "Register for Orientation"). Student Orientation is mandatory.



ST. JOHN'S
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Final High School Transcript(s)

Office of Undergraduate Admission

To complete your enrollment, St. John's needs confirmation of your high school graduation. Please complete this form and take it to your high school guidance or transcript office as soon as possible **after graduation**. Have your high school send St. John's your **final transcript showing your final grades and date of graduation by Wednesday, July 15, 2015**.

Thank you. We look forward to seeing you at Orientation.

Name: _____

St. John's Student ID #: X _____ Date of Birth: _____

St. John's University campus you will attend: Queens Staten Island Distance Learning

Transcript Office: Please send an official copy of my high school transcript—including final grades and date of graduation—to the following address:

St. John's University
Office of Admission Processing Center
P.O. Box 413
Randolph, MA 02368-9822

Student's Signature: _____

Date: _____

Questions? Call the Office of Undergraduate Admission.

Queens Campus
1-888-9STJOHNS
718-990-2000
admissions@stjohns.edu

Staten Island Campus
718-390-4500
siadmissions@stjohns.edu

Final High School Transcript(s)



ST. JOHN'S
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Final College Transcript(s)

Office of Undergraduate Admission

To complete your enrollment, St. John's needs final transcripts from each college you have attended. Please complete this form and take it to your college registrar's office. Have them send St. John's your **final transcript, showing your final grades, by Wednesday, July 15, 2015.** (You may make copies of this form if necessary.)

Thank you. We look forward to seeing you at Orientation.

Name: _____

St. John's Student ID #: X _____ Date of Birth: _____

St. John's University campus you will attend: Queens Staten Island Distance Learning

Registrar's Office: Please send an official copy of my college transcript—including final grades and date of graduation, if applicable—to the following address:

St. John's University
Office of Admission Processing Center
P.O. Box 413
Randolph, MA 02368-9822

Student's Signature: _____

Date: _____

Questions? Call the Office of Undergraduate Admission.

Queens Campus
1-888-9STJOHNS
718-990-2000
transfers@stjohns.edu

Staten Island Campus
718-390-4500
transfers@stjohns.edu

Final College Transcript(s)



ST. JOHN'S
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Academic Honor Pledge

Office of Undergraduate Admission

St. John's University is a diverse community of teachers and scholars committed to the principles of truth, love, respect, opportunity, excellence, and service. Members of the St. John's University community strive to create an atmosphere that embodies the University's Vincentian mission. Students and faculty commit themselves to the pursuit of wisdom and academic excellence, while fostering a responsibility for serving others. As members of this community, students are expected to maintain the principles of compassion and the values of honesty and academic integrity.

In accordance with this pledge, students acknowledge their commitment to the values and principles of the mission of St. John's University.

1. I will not tolerate or participate in any form of academic fraud by cheating, lying, or stealing, nor will I accept the actions of those who choose to violate this code.
2. I will conduct myself both honorably and responsibly in all my academic and nonacademic activities as a St. John's University student.

Adopted by the University community and Student Government Inc., April 2003.

Name (please print): _____

Student's Signature: _____

St. John's Student ID #: _____ Date: _____

Please complete by Wednesday, July 15, 2015, and return to:

St. John's University
Office of Admission Processing Center
P.O. Box 413
Randolph, MA 02368-9822



**ST. JOHN'S
UNIVERSITY**

Medical Records

(Please retain a copy for your files.)

Please complete and fax, mail, or return in person to the Health Services Center at the Queens campus by Friday, May 15, 2015.

Student Health Services

Queens Campus
8000 Utopia Parkway
Queens, NY 11439
Tel 718-990-6360
Fax 718-990-2368
stjohns.edu

Please print.

Name: _____ Date of Birth: _____

Address: _____ Home Tel: _____

Student X #: _____

Emergency Contact Name: _____ Tel: _____

Campus where you are enrolled: (check one) Queens Manhattan Staten Island

Medical History (Include dates if possible)

Allergy—Drugs: _____ Allergy—Other: _____

Allergy—Foods: _____ Kidney Disease: _____

Heart Disease: _____ Chicken Pox: _____

Diabetes: _____ Asthma: _____

Hypertension: _____ Seizure Disorder: _____

Hypoglycemia: _____ Other: _____

Have you had any serious accidents? Yes No Nature of injury: _____

List of operations and dates: _____

Do you take prescribed medications on a regular basis? Yes No

If yes, please list: _____

Do you have a physical, learning, or other disability of which the University should be aware in order to help you achieve your educational goals? Yes No If yes, please describe: _____

Health insurance is **MANDATORY** for all resident and international students.

CONSENT FOR MEDICAL TREATMENT: The law requires that parental permission be obtained so that medical treatment can be administered to students under the age of 18.

I hereby grant permission for medical evaluation, treatment and/or hospitalization in case of illness or accident for myself/son/daughter/guardian. I grant permission for hospital admission and for administration of anesthetics and necessary operative procedures in an emergency. I give permission for the release of information concerning my/his/her medical condition to other responsible University officials when necessary.

Name of Student: _____ Student X #: _____

Signature of Parent/Guardian: _____ Date: _____ Tel: _____



**ST. JOHN'S
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Physical Examination

(To be completed by physician or health care provider.)

Please complete and fax, mail, or return in person to the Health Services Center at the Queens campus by Friday, May 15, 2015.

Student Health Services
Queens Campus
8000 Utopia Parkway
Queens, NY 11439
Tel 718-990-6360
Fax 718-990-2368
stjohns.edu

Student Name: _____ Date of Birth: _____

Student X#: _____ Gender: Male Female

Campus where you are enrolled: (check one) Queens Manhattan Staten Island

Height: _____ Weight: _____ Blood Pressure: _____ Pulse: _____

Vision: _____ Right: _____ Left: _____ Corrected: Right: _____ Left: _____

For Health Sciences Students only:

Color Vision Screening Normal _____ Abnormal _____

Urinalysis Result Normal _____ Abnormal _____ Date: _____

Blood Count HCT: _____ HGB: _____ Date: _____

	Normal	Abnormal		Normal	Abnormal
Head, neck, face, and scalp	_____	_____	Abdomen	_____	_____
Nose and sinuses	_____	_____	Endocrine System	_____	_____
Mouth, teeth, gingival	_____	_____	Extremities	_____	_____
Ears	_____	_____	Reflexes	_____	_____
Eyes	_____	_____	Musculoskeletal	_____	_____
Lungs, chest, and breasts	_____	_____	Lymphatic	_____	_____
Heart	_____	_____	Neurologic	_____	_____
Vascular	_____	_____	Genital/Urinary	_____	_____

In your judgment, is there any reason why physical activities would be contradicted? Yes No
If yes, explain _____

Family history (relevant health problems) _____

TB SCREENING

Tuberculin Skin Test (within six months of exam): Date Planted ___/___/___ Date Read ___/___/___

Result: Positive Negative _____ mm induration

Pharm.D. Students Only two-step testing necessary: Date Planted ___/___/___ Date Read ___/___/___

Result: Positive Negative _____ mm induration

or QTF TB Gold Test Date ___/___/___ Result: Positive Negative **Attach QTF Lab Results**

*If QTF or PPD Test Positive, Chest X-Ray Required: Date ___/___/___ Result: Positive Negative

VACCINE RECORD (if blood titers drawn, please attach lab results)

Tetanus-Diphtheria Booster: (within 10 years) Date ___/___/___ Tdap Date ___/___/___

Varicella Vaccine: Dose 1 ___/___/___ Dose 2 ___/___/___ or Disease Date ___/___/___

Hepatitis B Vaccine (recommended): Dose 1 ___/___/___ Dose 2 ___/___/___ Dose 3 ___/___/___

Meningococcal Vaccine (recommended after 16th birthday): Date ___/___/___

or Refused Attach Meningitis Response Form

MMR (required by NYS Law): Dose 1 ___/___/___ Dose 2 ___/___/___

Polio series completed: Yes No

Physician's Name (Print): _____

Signature: _____ Exam Date: ___/___/___

License Number: _____ Physician Stamp: _____

or attach Rx with signature

The information contained on this form is accessible only to the professional health staff of the Student Health Services and will not be released without the written authorization of the student or pursuant to a lawfully issued subpoena. The authority to request this information is found in Section 355 of the Educational Law.



ST. JOHN'S
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Immunization

(Please retain a copy for your files.)

Please complete and fax, mail, or return in person to the Health Services Center at the Queens campus by Friday, May 15, 2015.

Office of Health Services
Queens Campus
8000 Utopia Parkway
Queens, NY 11439
Tel 718-990-6360
Fax 718-990-2368
stjohns.edu

Name: _____ Date of Birth: _____

Address: _____

Student X #: _____

Campus where you are enrolled: (check one) Queens Manhattan Staten Island

The New York State Legislature passed Public Health Law 2165 in June 1989, requiring ALL students attending colleges and universities in New York State who were born on or after January 1, 1957, to be immunized against measles, mumps, and rubella. Documentation of immunization must be completed before classes begin. Students who fail to present adequate documentation will not be permitted to register.

Proof of immunization consists of one of the following:

1. A certificate of immunization signed by your physician or health care provider (see form below).
2. A student health record from a previously attended school that properly documents your immunization history.
3. Serologic testing for MMR antibodies with laboratory copy of same is acceptable proof of immunity.
4. Documentation that proves you have attended primary or secondary school in the United States AFTER 1980 will be sufficient proof that you have received one dose of live measles virus vaccine. You must also provide a certificate of immunization that documents a dose of measles vaccine was administered within one year prior to attendance at the postsecondary institution. Documentation of mumps and rubella vaccines as stated above must also be provided.

For physician to complete:

1. This student has received MMR immunization. (It is required by law that students receive TWO doses of measles vaccine and ONE dose of mumps and rubella vaccine. An immunization given before 1968 is acceptable only if the immunization record specifies that the vaccine was a live virus vaccine.) A dose of live virus measles, mumps, and rubella vaccine must be administered no more than four days prior to a child's first birthday, and a second dose of live measles, mumps, and rubella vaccine must be administered no less than 28 days after the first dose.

MMR	(first dose date): _____	(second dose date): _____
Measles	(first dose date): _____	(second dose date): _____
Mumps	(first dose date): _____	(second dose date): _____
Rubella	(first dose date): _____	(second dose date): _____

2. Serologic evidence of immunity for MMR: (Please attach laboratory reports.)

Physician's Signature: _____

Address: _____

License #: _____ Phone: _____

Physician's Stamp: _____

Important Meningitis Information

St. John's University is in compliance with New York State Public Health Law 2167, which requires ALL students attending colleges and universities in New York State to be given information relating to immunization against meningococcal meningitis. By law, you must respond to this notification within 30 days.

An airborne disease, meningococcal meningitis is transmitted through droplets of respiratory secretions and from direct contact with persons infected with the disease. College students spending many hours together in close physical contact and/or living in confined areas such as residence halls are at an increased risk of contracting the disease.

Meningococcal meningitis causes an inflammation of the membranes covering the brain and spinal cord. It can be treated with antibiotics but is sometimes not diagnosed early enough. Symptoms of the most common type of meningococcal meningitis are high fever, severe headache, stiff neck, nausea and vomiting, lethargy, and a rapidly progressing rash. The disease strikes about 3,000 Americans and claims about 300 lives each year. Between 100 and 125 meningitis cases occur on college campuses and as many as 15 students will die from the disease each year. Though it occurs most often in late winter or early spring, it can occur in any season.

A vaccine is available to protect against four types of the bacteria causing meningitis in the United States: types A, C, Y, and W-135. These types account for nearly two-thirds of meningitis cases among college students. The vaccine does not protect against all strains of the disease and does not provide lifelong immunity. To help you make an informed decision about being immunized, talk with your health care provider to consider the benefits and risks of meningococcal meningitis immunization.

Though Student Health Services does not provide the vaccine on campus, we can refer students to local health care providers if requested. The cost of the vaccine varies, but in our area the approximate cost is about \$100–\$200. Be advised that insurance may not pay for the cost of the vaccine.

For your information, we enclose a fact sheet about meningitis provided by the New York State Department of Health. After reading the fact sheet and consulting with your health care provider, please complete the form provided and return it to this office. You may also fax the form to Student Health Services.

Thank you for taking the time to consider this important information about meningococcal meningitis and the available vaccine.

Meningococcal Disease Information Sheet

Information for college students and parents of children at residential schools and overnight camps

What is meningococcal disease?

Meningococcal disease is a severe bacterial infection of the bloodstream or meninges (a thin lining covering the brain and spinal cord).

Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children. For some college students, such as freshmen living in dormitories, there is an increased risk of meningococcal disease. Between 100 and 125 cases of meningococcal disease occur on college campuses every year in the United States; between five and 15 college students die each year as result of infection.

Currently, no data is available regarding whether children at overnight camps or residential schools are at the same increased risk for disease. However, these children can be in settings similar to college freshmen living in dormitories. Other persons at increased risk include household contacts of a person known to have had this disease, immunocompromised people, and people traveling to parts of the world where meningitis is prevalent.

How is the meningococcus germ spread?

The meningococcus germ is spread by direct close contact with nose or throat discharges of an infected person. Many people carry this particular germ in their nose and throat without any signs of illness, while others may develop serious symptoms.

What are the symptoms?

High fever, headache, vomiting, stiff neck, and a rash are symptoms of meningococcal disease. Among people who develop meningococcal disease, 10–15 percent die in spite of treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur.

How soon do the symptoms appear?

The symptoms may appear two to 10 days after exposure, but usually within five days.

What is the treatment for meningococcal disease?

Antibiotics, such as penicillin G or ceftriaxone, can be used to treat people with meningococcal disease.

Is there a vaccine to prevent meningococcal meningitis?

Yes, a safe and effective vaccine is available. The vaccine is 85–100 percent effective in preventing four kinds of bacteria (serogroups A, C, Y, W-135) that cause about 70 percent of the disease in the United States.

Is the vaccine safe? Are there adverse side effects to the vaccine?

The vaccine is safe, with mild and infrequent side effects, such as redness and pain at the injection site lasting up to two days.

What is the duration of protection from the vaccine?

After vaccination, immunity develops within seven to 10 days and remains effective for approximately three to five years. As with any vaccine, vaccination against meningitis may not protect 100 percent of all susceptible individuals.

How do I get more information about meningococcal disease and vaccination?

Contact your family physician or your student health service. Additional information is also available on the websites of the New York State Department of Health, (health.state.ny.us), the Centers for Disease Control and Prevention, (cdc.gov/ncid/dbmd/diseaseinfo); and the American College Health Association, (acha.org).



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Meningitis Form

(Please retain a copy for your files.)

Please complete and fax, mail, or return in person to the Health Services Center at the Queens campus by Friday, May 15, 2015.

Student Health Services

Queens Campus
8000 Utopia Parkway
Queens, NY 11439
Tel 718-990-6360
Fax 718-990-2368
stjohns.edu

Name: _____ Date of Birth: _____

Address: _____

Student X #: _____

Campus where you are enrolled: (check one) Queens Manhattan Staten Island

St. John's University is in compliance with New York State Public Health Law 2167, requiring all college and university students and parents or guardians (if student is under age 18) to complete and return this form to Student Health Services at the address above.

All students (and parents or guardians if student is under age 18) must complete and sign below. Please note: It is necessary to complete this form even if documentation of this vaccine is already on file.

CHECK ONE BOX AND SIGN BELOW:

Had the meningococcal meningitis vaccine at age 16 years or older. Date: _____

Health care provider's signature: _____

Address: _____

License # : _____ Tel: _____

Stamp: _____

I have (for students under age 18: "My child has"):

Read, or have had explained to me, the information regarding meningococcal meningitis disease. I understand the risks of not receiving the vaccine. I have decided that I (my child) will not obtain immunization against meningococcal meningitis disease.

Signed: _____ Date: _____

(Parent/guardian if student is under age 18)



Welcome to St. John's University!

To prepare you for your first exciting semester, St. John's University holds a special—and mandatory—orientation program. The spirit of our orientation programs reflect St. John's concern for the holistic development of every student. St. John's offers an education that prepares you for personal and professional success in a global society that is rooted in our 144-year heritage as a Catholic, Vincentian, and metropolitan University. At Orientation, you learn about the benefits of the St. John's experience and the many student services available—academic support, career preparation, high-tech resources, extracurricular activities—and have an opportunity to meet new friends and form lifelong relationships.

Both the online and on-campus portions of New Student Orientation are **MANDATORY**. Once you complete the online portion of the program, you will be prompted to sign up for an on-campus orientation date (found on Page 12).

The following pages contain important information for you and your parents, including how to confirm your mandatory attendance for New Student Orientation. Your parents/guardians can attend as well by registering for our special Parent Orientation, but due to the nature of the orientation, no other guests are permitted.

Immediately after reading the following pages, please visit stjohns.edu/orientation to confirm your attendance at Orientation. For more information, please contact us at:

Queens campus	718-990-5353
Staten Island campus	718-390-4131

We look forward to your arrival!

Kathryn T. Hutchinson, Ph.D.

Kathryn T. Hutchinson, Ph.D.
Vice President for Student Affairs



ST. JOHN'S
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What is Orientation and why is it important to attend?

Fall Orientation brings the University community together to welcome new students. Both the online and on-campus portions of New Student Orientation are **MANDATORY**. Once you complete the online portion of the program, you will be prompted to sign up for an on-campus orientation date. Orientation is **REQUIRED** for all new students, whether they are freshman, transfer, international, resident, or commuter students. During Orientation, students have the opportunity to become better acquainted with the academic environment, support services, and important locations on campus while learning about the St. John's experience from current students.

Orientation Dates

QUEENS CAMPUS

Overnight Sessions

Session 1: Monday–Tuesday, June 29–30
Session 2: Wednesday–Thursday, July 8–9
Session 3: Wednesday–Thursday, July 15–16
Session 4: Wednesday–Thursday, July 22–23
Session 5: Wednesday–Thursday, July 29–30
Session 6: Wednesday–Thursday, August 5–6
Session 8: Friday–Saturday, August 28–29

Non-Overnight Sessions

Session 7: Wednesday–Thursday, August 12–13

Transfer Students

Session 1: Tuesday, July 7
Session 2: Thursday, August 27

STATEN ISLAND CAMPUS

Freshman and Transfer Students

Student Orientation: Sunday, August 30–Tuesday, September 1, 2015

Parents

Commuter Parent Orientation: Wednesday, July 15, 2015
Resident Parent Orientation: Sunday, August 30, 2015

Freshman Orientation and Transfer Orientation 2015

The Orientation program provides the best way for new students to become acclimated to our academic environment. This is your opportunity to learn about the many resources that will smooth your transition to St. John's. Student Orientation leaders will be available to share insights on their experiences, so ask them any questions you may have. Please do not plan to leave campus until the program is over. More information about your specific program can be found on the registration page at stjohns.edu/orientation.

International Students

The English as a Second Language (ESL) test is scheduled for the week before school begins. Students required to take the test should immediately make arrangements with our ESL office. For more information, contact the ESL office at [718-990-5262](tel:718-990-5262).

Parent Orientation*

We strongly encourage parents and guardians to attend the Orientation program with their student to learn how to support them during this time of transition at St. John's.

Special Accommodations

If you need special accommodations (e.g., dietary restrictions, wheelchair access, sign interpreter, etc.), please send us an e-mail at orientation@stjohns.edu with your name, X number, date of attendance, and the specifics of your request.

*** We will send all parents of incoming students a notification about Orientation.**





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Orientation Confirmation

Online confirmation (preferred method)

Please confirm your Orientation attendance online at stjohns.edu/orientation.
Click "Register for Orientation."

The next page will ask you to enter your **USER ID** and **PIN** number. Your **USER ID** is your personal **X number** (i.e., X98977734) as assigned in your acceptance letter. Your **PIN** number is your birthdate in month/date/year format (i.e., for August 30, 1985, enter 083085). After entering your **USER ID** and your **PIN** number, click "LOGIN."

At the next screen, choose the "Student Services and Financial Aid" link. Next, choose the "New Student Orientation" link, click "Register/Change Orientation Session." Once you have completed the process online, you are officially confirmed for Orientation!

Congratulations! You are one step closer to becoming a St. John's student!

Questions? Call the Orientation Office at 718-990-5353 or 1-888-9STJOHNS.

Directions

For directions to our Queens and Staten Island campuses, please visit us at stjohns.edu/directions.

What You Need to Know

Resident Students

Depending on your Orientation date, you might have a different move-in date. Residence Life will communicate with all students regarding their move-in dates in late summer. For any immediate questions regarding residence hall move-in, contact Residence Life at 718-990-2417 (Queens campus) or 718-390-4080 (Staten Island campus).

Meals, Expenses, and Dress Code

We provide meals for all students at Orientation. If you have dietary restrictions, please indicate this when confirming your attendance. You also may want to bring spending money for souvenirs, books, or other items from our bookstore, or for snacks from the vending machines and dining facilities. Since we'll be moving around the campus, the more comfortable you are, the better you will feel. **Please be prepared for inclement weather.**





**ST. JOHN'S
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Your StormCard

Your St. John's University StormCard is your primary means of identification on campus. It must be carried at all times and presented to University personnel as requested.

However, your StormCard is much more than an ID card. It also serves as a handy debit card you can use for purchases from our dining facilities, the University Bookstore, photocopiers, and computer lab printers. The StormCard also gives authorized students access to the residence halls, computer labs, classrooms, and parking facilities. You will need your StormCard to visit friends who live on campus.



How Do I Get My StormCard?

Students are photographed for their StormCard during Orientation and receive them before the end of the day during registration. If you can make it to campus prior to your Orientation date, please visit the Office of Public Safety for your StormCard.

If you have any questions or concerns, you may contact the StormCard Office at 718-990-6257 (Queens or Manhattan campuses) or 718-390-4487 (Staten Island campus).





We look forward to seeing you at Orientation!

stjohns.edu/orientation



get acquainted



ST. JOHN'S UNIVERSITY

Office of Undergraduate Admission

8000 Utopia Parkway
Queens, NY 11439
1-888-9STJOHNS
admhelp@stjohns.edu

300 Howard Avenue
Staten Island, NY 10301
718-390-4500
siadmissions@stjohns.edu

101 Astor Place
New York, NY 10003
admhelp@stjohns.edu

Office of Student Orientation

8000 Utopia Parkway
Queens, NY 11439
718-990-5353

300 Howard Avenue
Staten Island, NY 10301
718-390-4131

101 Astor Place
New York, NY 10003
1-888-9STJOHNS