

New Student Orientation

OFFICE OF STUDENT AFFAIRS AND MISSION INTEGRATION
518-861-2502 | Mercy Hall



Student Information

Name		Student ID	
Program		Date	
Department		Advisor	

Please answer the following questions to the best of your ability.

1. Which best describes you? (Select all that apply.)

- First-time at College Transfer Student Returning Student International
- First-Generation to Attend Other: _____

2. If you have attended college before, how many institutions have you attended prior to Maria College?

- 1 2 3 4 or more.

3. How many credits will you be taking this semester?

- 12 credit or more 7 to 11 credits 6 credits or less

4. How many hours a day can you reasonably devote to your studies?

- 1-2 2-4 4-6 6 or more

5. How will you fund your education this semester? (Select all that apply)

- Loans Grants/Scholarships Out of Pocket Employer Reimbursement

6. If working while attending school, how many hours per week do you plan to work during the semester?

- Less than 10 10-20 21-30 31-40 More than 40 N/A

7. If working while attending school, how supportive is your employer of studies?

- Very Supportive Supportive Somewhat Supportive Not at All

8. If using public transportation, how long is your average commute to campus?

- 30 minutes or less 30 min to 1 hour 1 to 2 hours More than 2 hours N/A

9. Are you currently a homemaker who is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment?

- Yes No

If yes, briefly describe your current situation: _____

10. Which of the following best describes your family arrangement?

- Single Single w/ children Married Married w/ children Other

If other, describe your arrangement: _____

11. If you have children, how reliable are your childcare services?

- Completely Reliable Reliable Somewhat Reliable Unreliable No Child Care

12. Circle any and all of the following items that apply to you:

- a. There have been times when I did not know where my next meal was coming from.
- b. There have been times when I involuntarily ate less than I needed.
- c. I have used or currently use a food pantry.
- d. I have used or currently use food stamps.

If you circled any of the above statements, please briefly describe the situation: _____

13. Is English your primary language?

- Yes No If no, please indicate your primary language: _____

14. Have you served or are you currently serving in the military?

- Yes (If Yes, please indicate branch below) No

- Army Navy Marines Air Force Coast Guard National Guard

Rank your ability in the following areas

	Poor	Fair	Satisfactory	Good	Excellent
Time Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Internet & Technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					

What would you like us to know about your current academic abilities and/or needs?

Maria College offers the following FREE resources. Indicate your likelihood to use them

	Never	Unlikely	Maybe	Most Likely	Definitely
Tutoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Mental Health Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Spiritual Guidance/Pastoral Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Academic Advisement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Career Advisement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Writing Workshops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Math/Science Workshops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Internet & Tech Workshops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Food Pantry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					

What services or resources not listed above would you like to see offered?