INDEPENDENT SCHOOLS ADMISSIONS ASSOCIATION of GREATER NEW YORK

ISAAGNY

Student Interests and Activities Form

Schools are interested in learning more about you and how you spend your time outside of the classroom. Please share your co-curricular activities, interests, and/or responsibilities. It is not necessary to fill out all of the available fields; the admission team is most interested in the activities that are most important to you. Please include only those activities and interests in which you have participated within the past three years.

STUDENT ACTIVITIES

ACTIVITY TYPE (Choose from: Family/Work, Arts, Athletics, Community Engagement, Other)	ORGANIZATION, INSTRUMENT TYPE, TEAM NAME, ETC.	HOW MANY YEARS HAVE YOU BEEN INVOLVED?	HOURS PER WEEK and WEEKS PER YEAR	ADDITIONAL DETAILS (If applicable, please include level, positions held, etc.)

ADDITIONAL QUESTIONS

What activity, interest, or accomplishment are you most proud of and why?

In which three activities are you most interested in participating next year?

Are there new activities that you would like to try?