

GRADUATE APPLICATION FOR ADMISSION TO MARSHALL UNIVERSITY

Degree Programs, Certificate/Professional Development, Non-Degree, and Transient



Marshall University • Graduate Admissions Office
100 Angus E. Peyton Drive
South Charleston, WV 25303-1600
304/746-1900 or 1/800/642-9842

A non-refundable \$40 application fee is required.

NOTE: Submit the application fee with the Application for Admission form.
Please make check payable to MARSHALL UNIVERSITY with the student's name and Social Security number or MUID number included.

PLEASE TYPE OR PRINT CLEARLY USING BLACK OR DARK BLUE INK ONLY.

SEMESTER AND YEAR YOU PLAN TO ENROLL: Select the semester and enter the year below. (Note application deadlines.)

☐ Fall (Deadline: AUG 1) ☐ Spring (Deadline: DEC 1) ☐ Summer (Deadline: May 1) Year _____

If no term is indicated, or if the application is submitted after a deadline has passed, the default may be the next term available for the program.

LEGAL NAME: Last First Middle			Social Security Number or MUID Number — —	
Any other names under which credentials may arrive:			Email	
Your Permanent Address: Street		City	State	Zip Code
County	Country (if not U.S.)	Home Phone ()	Business Phone ()	

At which location do you plan to enroll for the majority of your courses? (check one) **Have you applied for Graduate Admission to Marshall before?**
☐ Huntington Campus ☐ South Charleston Campus ☐ Yes ☐ No If yes, give year: _____

TYPE OF ADMISSION: ☐ Degree Seeking ☐ Certificate/Professional Development Program ☐ Transient -A student enrolled at another institution who plans to enroll in graduate coursework at Marshall University for one semester.
☐ Non-Degree/Post Masters* ☐ Non-Degree/Post Baccalaureate*
**Non-degree candidates complete only pages 1 and 2*

NAME OF MAJOR: (See insert) **MAJOR CODE:** (see insert)

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Are you currently enrolled in a Graduate program at Marshall University? ☐ Yes ☐ No If yes, indicate what program?
 If Yes, do you want to remain in this program in addition to the new program you are currently applying to: ☐ Yes ☐ No

Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date: Month _____ Day _____ Year _____	Birth Place: City _____ State _____ Country (if not U.S.) _____	Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Nonresident Alien* <input type="checkbox"/> Resident Alien <input type="checkbox"/> Refugee *International Applicants: Please do not use this form. Visit: www.marshall.edu/cip
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EMERGENCY CONTACT: NAME: _____ Telephone: _____
 Address: _____

ADDITIONAL INFORMATION: The information requested below is utilized to meet Federal and State requirements. Your optional but important responses will not be used in the admission process.

Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers, and our own college/university communities, to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to answer the following two questions:

Do you consider yourself Hispanic/Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)
☐ Yes ☐ No

In addition, select one or more of the following racial categories to describe yourself:

- ☐ **American Indian or Alaskan Native** - A person having origins in any of the original peoples of North and South American (including Central American) and who maintains cultural identification through tribal affiliation or community attachment.
- ☐ **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia or Indian Subcontinent origin, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- ☐ **Black or African American** - A person having origins in any of the black racial groups of Africa.
- ☐ **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ **White** - A person having origins in any of the original peoples of Europe, Middle East or North Africa.

List all colleges and universities attended or attending, including Marshall: If you have attended more than six schools, please list them on a separate sheet.
An official transcript must be received in the Graduate Admissions Office directly from the registrar of each college or university attended (except Marshall).
 Failure to disclose all institutions attended may result in delayed review of application, denial of admission, administrative withdrawal, and/or disciplinary action.

Name of School	City and State	Date entered Month/year	Date left Month/year	Degree earned	(Office use)

TEST SCORES: Check **all** that apply and include date test taken

☐ GRE _____ ☐ GRE _____
☐ GMAT _____ ☐ Miller Analogies _____

UNDERGRADUATE MAJOR: _____

FEE CLASSIFICATION APPLYING FOR:

☐ West Virginia Resident
☐ Metro (Gallia, Jackson, Lawrence, Meigs, Pike and Scioto counties of Ohio, Boyd, Carter, Elliott, Floyd, Greenup, Johnson, Lawrence, Martin and Pike counties of Kentucky).
☐ Nonresident (out-of-state, except Metro)

PRESENT OCCUPATION: _____ If a teacher: Type of Certificate: _____
 Years of Teaching Experience: ☐ Elementary _____ ☐ Middle School/Junior High _____ ☐ High School _____ ☐ Not applicable
 If you are applying to the MAT/PBC program, what is your intended teaching content area? _____

RESIDENCY INFORMATION QUESTIONNAIRE:

Documentation may be required, and if so, is due by the end of the first week of classes of the term of application.

This section must be completed by all applicants claiming West Virginia or metro residency.

- Enter the dates during which you have maintained a domicile and continuous residence in West Virginia or a metro county:
 From: Month _____ Day _____ Year _____
 To: Month _____ Day _____ Year _____
- Have you filed a West Virginia or metro county Income Tax return during the past 12 months? ☐ Yes ☐ No
 If yes, did you claim West Virginia or metro county residency on the tax return? ☐ Yes ☐ No
- Do you own residential property in West Virginia or a metro county? ☐ Yes ☐ No
- Have you paid West Virginia or metro county real or personal property taxes during the past 12 months? ☐ Yes ☐ No
- Will you file a West Virginia or metro county Income Tax return for the current year? ☐ Yes ☐ No
- If married, is your spouse a resident of West Virginia or a metro county? ☐ Yes ☐ No
- Do you have a motor vehicle registered in your name? ☐ Yes ☐ No
 If yes, is that vehicle licensed in West Virginia or a metro county? ☐ Yes ☐ No
- Driver's License number: _____ State _____ Issue date: _____
- Are you currently a registered voter in West Virginia or a metro county? ☐ Yes ☐ No

Please attach a separate page with additional information, if applicable, such as experience pertinent to your proposed major field of study, professional goals, honorary and professional organizations, etc. Be sure to include your name on any separate pages.

AGREEMENT OF TERMS: The information I have entered on this form is true and correct. I understand that this application and all academic credentials should be on file in the Graduate Admissions Office by the application deadline, and that I must be formally admitted to the University before I will be permitted to register, be considered for financial aid, or for a graduate assistantship. **I understand that withholding or failing to provide accurate and complete information may result in administrative withdrawal, disciplinary action or prosecution by the University, and that I may be held responsible for payment of all fees. In consideration of my admission and enrollment, I, the undersigned, do hereby agree to assume and pay any and all costs and charges including interest, collection and reasonable attorney's fees for delinquent accounts.** I have read the general instructions in the admissions application folder. **I understand that all materials submitted in support of an application for admission become the property of Marshall University Graduate College. Materials will not be returned or released to the student or to third parties. I understand that the \$40.00 application fee is non-refundable. I acknowledge and agree to these terms and conditions.**

Date: _____ Signature (required): _____

**KEEP THE APPLICATION FOLDER FOR YOUR FILES.
 SUBMIT THE NON-REFUNDABLE \$40.00 APPLICATION FEE PAYMENT WITH THIS FORM.**

OFFICE USE ONLY: Test scores:

GPA (s) :