



ARKANSAS STATE UNIVERSITY

APPLICATION FOR ADMISSION
ARKANSAS STATE UNIVERSITY GRADUATE SCHOOL

All applicants must submit this completed application and written documentation of measles, mumps, and rubella immunization to the Graduate School at: ASU Graduate School, P.O. Box 60, State University, AR 72467.

Students are also required to request a separate, official transcript from each college and/or university attended since leaving high school to be mailed directly to: ASU Graduate School, P. O. Box 60, State University, AR 72467.

A \$30 application fee (\$50 for doctoral applications) must accompany the attached Fee Slip and mailed directly to: ASU Cashier's Window, P. O. Box 2640, State University, AR 72467 or call them at (870) 972-3847 to pay with a debit or credit card in order for your application to be processed.

EQUAL OPPORTUNITY-AFFIRMATIVE ACTION Arkansas State University policy and practice strongly supports the goals of equal opportunity and affirmative action in its educational programs and activities.

Please PRINT or TYPE all requested information

Social Security Number: _____

Email address _____

1. NAME (print) _____ 2. SEX () Male () Female
(Last) (First) (Middle)

3. LIST ANY OTHER NAMES USED ON EDUCATIONAL RECORDS _____

4. PERMANENT MAILING ADDRESS (No. & St. or P.O. Box) (City) (County) (State) (Zip) Phone _____

5. CAMPUS OR LOCAL ADDRESS (No. & St. or P.O. Box) (City) (County) (State) (Zip) Phone _____

6. DATE OF BIRTH (Month)(Day)(Year) BIRTHPLACE (City) (State) Country of Citizenship _____

7. RESIDENCE: () Resident of Arkansas () Not a resident of Arkansas () Resident Alien If not a US citizen, do you have a permanent residency card? _____

8. ETHNICITY INFORMATION (optional): () Non Hispanic/Latino () Hispanic/Latino

9. RACIAL INFORMATION (optional): () American Indian /Alaska Native () Asian () Black/African- American
() Native Hawaiian/ Pacific Islander () White/Caucasian () Two or more races

10. WHEN DO YOU PLAN TO ENROLL IN THE ASU GRADUATE SCHOOL?

() Fall _____ yr () Spring _____ yr () 1st Summer _____ yr () 2nd Summer _____ yr () _____ Interim/yr

REGISTRATION CLASSIFICATION REQUESTED _____ NON DEGREE _____ CERTIFICATION _____ DEGREE SEEKING

11. GRADUATE DEGREE YOU PLAN TO PURSUE Degree _____ Major _____

12. DO YOU POSSESS A FULL TEACHING CERTIFICATE? () Yes () No If yes, specify level and field. _____
Completed Praxis II Exam () Yes () No

13. HAVE YOU SERVED IN THE ARMED FORCES? () Yes () No

14. HAVE YOU EVER BEEN CONVICTED OF A FELONY OR ARE THERE ANY FELONY CRIMINAL CHARGES NOW PENDING AGAINST YOU? () Yes () No

15. LIST ALL COLLEGES OR UNIVERSITIES ATTENDED SINCE LEAVING HIGH SCHOOL

Name of School Dates of Attendance Semester Hours Attempted Undergraduate Graduate Degree Received

Undergraduate Major _____ Minor _____ Graduate Major _____

16. CAMPUS THAT YOU INTEND TO TAKE MAJORITY OF CLASSES (optional) _____

I hereby affirm that all information supplied on this form is complete and accurate. It is my understanding that I shall not be considered for admission to Arkansas State University until I have submitted all credentials specified.

Date _____ Signed _____



**ARKANSAS STATE UNIVERSITY
GRADUATE SCHOOL
FEE SLIP
FOAPAL #110000/261001/512901/0000
(attach to payment)**

Applicant's Name _____

Social Security Number _____

Graduate Program Requested _____

Term Requested _____

Applicant's Signature _____

**This slip must accompany the Application fee paid by check or money order made payable to ASU Graduate School and mailed directly to:
ASU Cashier Window
P O Box 2640
State University, AR 72467**

The Application fee may also be paid by a debit or credit card by calling the Cashier's Window at (870) 972-3847.

All Application documents, **except the fee**, must be mailed directly to the ASU Graduate School office at:
ASU Graduate School
P O Box 60
State University, AR 72467

GENERAL DOCUMENTS REQUIRED IN THE APPLICATION PROCESS

(PLEASE CONSULT THE GRADUATE BULLETIN FOR MORE SPECIFIC ADMISSION REQUIREMENTS FOR EACH MAJOR)

1. A completed application sent to: ASU Graduate School, P O Box 60, State University, AR 72467.
(There may be some of our programs that have an additional department application forms and deadlines, which can be found on the individual department websites.)
2. Official transcripts from all colleges and universities attended since leaving high school. Transcripts must be mailed directly from the institutions previous attended to: ASU Graduate School, P O Box 60, State University, AR 72467.
3. All students are required to present written documentation of measles, mumps and rubella immunization. This immunization must have been received after the first birthday and after January 1, 1968 and sent to: ASU Graduate School, P O Box 60, State University, AR 72467.
4. Arkansas law requires that in order to be eligible for enrollment at a public institution of higher learning an applicant who is a U.S. citizen must be registered or be exempt from registration with the selective service system. A form affirming registration is also required for admission to Graduate School and is available at the Graduate School website. Please form must be sent to: ASU Graduate School, P O Box 60, State University, AR 72467.
5. A \$30 application fee (\$50 for Doctoral applications), along with the Fee Slip attached to this application, must be sent to: ASU Cashier Window, P O Box 2640, State University, AR 72467. The fee may also be paid by calling the Cashier's Window directly at (870) 972-3847, and paying with a debit or credit card.
6. Application materials become the property of the university and may not be returned to the applicant or forwarded to other institutions. For deadline information, please contact the department of your requested major.
7. If a standardized test is required for your major, you may contact the Testing Center at Arkansas State University to make the necessary arrangements for testing. The telephone number is 870-972-2038.

RESIDENCE INFORMATION

To be classified as an "in-state" student for fee purposes, a student must be a bona fide domiciliary of Arkansas and must have resided in that status for at least six consecutive months prior to the beginning of the term or semester for which the fees are to be paid.

A student from outside Arkansas shall have the burden of establishing in-state status for fee purposes, and evidence to that effect must be presented in writing, verified under oath by the student. A student who knowingly gives erroneous information to evade payment of out-of-state fees shall be subject to dismissal from the University.

**ALL APPLICATION DOCUMENTS, EXCEPT THE APPLICATION FEE, MUST BE SUBMITTED TO THE DEAN OF THE GRADUATE SCHOOL AT:
ASU GRADUATE SCHOOL, P.O. BOX 60, STATE UNIVERSITY, AR 72467.**

**ALL APPLICATION FEES MUST BE SUBMITTED TO THE ASU CASHIER WINDOW, BY CALLING (870) 972-3847 AND PAYING WITH A DEBIT OR CREDIT CARD OR SUBMIT CHECKS OR MONEY ORDERS TO:
ASU CASHIER WINDOW, P. O. BOX 2640, STATE UNIVERISTY, AR 72467.**

For more information, please contact us at:
ASU Graduate School
Telephone: 870-972-3029
FAX: 870-972-3857
E-mail: gradsch@astate.edu
Internet: <http://www.astate.edu/graduate>

To access the Graduate Bulletin website:
<http://www2.astate.edu/a/graduate/graduate-catalog.dot>