

*Graduate Admission Application*

Please indicate the semester in which graduate work will begin:

Fall, 20Click here to enter text. Spring, 20Click here to enter text. Summer, 20Click here to enter text.

**STUDENT INFORMATION**

Social Security Number\* Click here to enter text.

Name Click here to enter text.

Street Address Click here to enter text. City Click here to enter text. State Click here to enter text. Zip Click here to enter text.

Work Phone Click here to enter text. Cell Phone Click here to enter text.

E-mail (Home) Click here to enter text. (Work) Click here to enter text.

State of Residency Click here to enter text. If Minnesota, how long have you lived here? (Years/Months) Click here to enter text.

County of Residency Click here to enter text. Occupation Click here to enter text. Employer Click here to enter text.

Are you a U.S. Citizen: Yes No If not, what type of visa do you hold? Click here to enter text.

Are you a graduate of SMSU? Yes No If yes, transcripts are not required for this application.

\* Many colleges/universities use Social Security numbers for students identification purposes on student records. Providing your Social Security number is voluntary. If you do not provide it, your application will still be processed. This data is requested for purposes of administration, program evaluation, and consumer and alumni data. Your number also may be used to create summary information about MnSCU programs through stat matches and other state agencies.

**EDUCATIONAL INFORMATION**

A Bachelor’s degree from an accredited institution is a prerequisite from pursuing graduate work at SMSU. Official transcripts of all academic work

from each institution must be submitted for full admission to a graduate program.

University Granting Bachelor’s Degree Click here to enter text.

Degree Granted: (B.S./B.S. etc.) Click here to enter text. Date Granted Click here to enter text.

Majors/ Minors Click here to enter text.

Other Institutions Attended Click here to enter text.

Have you earned graduate credits at another institution? Yes No If yes, where Click here to enter text.

**PROFESSIONAL INFORMATION**

Do you plan to earn a master’s degree from Southwest Minnesota State?  Yes  No  Licensure Only

Do you plan to transfer graduate credits to SMSU from another university?  Yes  No

**PROGRAM INFORMATION**

**BUSINESS PROGRAM:**

**Master of Business Administration**  Leadership  Management Marketing

**EDUCATION PROGRAMS:**

**Master of Science in Education, Off-campus**  **Master of Science** *in Special Education with*

**Learning Communities** *options:*

*Emphasis in:*  Autism Spectrum Disorder

English  Developmental Disabilities

Math  Emotional Behavioral Disorders

Reading  Learning Disabilities

TESL

(Site Location: Click here to enter text.)

**Master of Science** *in Education with emphasis in:*

English

Math

Reading

Sports Leadership

Coaching & Teaching

Leadership & Management

Sales & Marketing

Teaching English as a Second Language

Teaching, Learning, & Leadership

**Master of Science** *in Physical Education:*

*Coaching of Sport*

**Educational Administration and Leadership**

Principal

Superintendent

Director of Special Education

**Licensure Only Options:**

Reading

Teaching English as a Second Language

**Teaching Licensure Area(s)\*:** Click here to enter text.Expiration Date Click here to enter text.

**\*NOTE: Reading, Special Education, and TESL programs require teaching licensure prior to admission**

**Math requires a Math or Secondary Math Education degree. In addition, Special Education requires**

**an ABS Licensure prior to enrollment in the endorsement courses.**

*I certify that the information I have provided on this application and in all other admission materials is complete, accurate, and true to the best of my knowledge. I understand that misrepresentation of application information is sufficient grounds for cancellation of admission to the University. If you are completing this form electronically, by typing your name, it will serve as an electronic signature for this form.*

Application Signature: Click here to enter text. Date: Click here to enter text.

Please return this electronic application to GraduateStudies@SMSU.edu