If you have ever been accepted as a graduate student at YSU, you must complete a READMISSION FORM instead of this application.

YOUNGSTOWN STATE UNIVERSITY SCHOOL OF GRADUATE STUDIES AND RESEARCH YOUNGSTOWN, OHIO 44555 APPLICATION FOR GRADUATE PROGRAM ADMISSION

If you have never attended the Graduate School at YSU, please return this application with a \$40 nonrefundable application fee to Student Accounts & University Receivables, Youngstown State University, One University Plaza, Youngstown, OH 44555.

						Offiversity Fiaz	a, .oungstow	, 511 445551
Social Security Number	Last N	Name		First Name	Middle Nam	ne	Former	Name
Mailing Address	•			☐ Female ☐ Male	Birthdate (mont	h, day, year)		
City	Zip		Home Telephone ()				
				Work Telephone ()			
County				Cell Phone ()				
Permanent Address (if different)				E-mail Address				
City	Zip Selective Service Number					or		
County				Reason for exemption _				
Are you a resident of Ohio?				Name of Spouse or Next of Kin				
				Relationship				
				Address				
previous address, including dates (month and year) for the past year:				Indicate your citizenship: United States International				
Previous Address				If international, what is your country of citizenship?				
City	Zip		country of birth? city of birth					
County	From	To		type of visa presently h	eld?			
Ethnicity: Do you consider yourse ☐ Hispanic or Latino ☐ Not Hisp Race: What race do you consider y ☐ American Indian or Alaska Nativ ☐ Asian ☐ Black or African American		lander	Where did you hear about the YSU School of Graduate Studies and Research? ☐ YSU undergraduate ☐ graduate school fair (location) ☐ friend/family ☐ Graduate School Guide ☐ media advertisement ☐ flyer ☐ other ☐ GradSchools.com					
Educational Data: List all colleges a	attended in chronological	order, including Youngs	stown S	tate University.				
Name of Institution	City and State		nd State	from month year	to month year	degre if	e earned any	
Term you wish E	intrance test taken:		Gradua	ite Program		<u> </u>		
to enter:	o enter:			acher Education Programs, indicate teaching specialty:				
Fall	⊔ MAI							
Spring	Date test taken		Educat	ion candidates։ Attach coր	oies of teaching certif	icates/licenses h	ield.	
Summer \square				egree Graduate Certificate				
Disability that may require speci	al services? □ Yes □	No	-	ou ever attended another	_			
☐ Transient student from anoth			, ,	vhere? ou ever been suspended o				
attending YSU for one semest	ter		,	□ No If yes, when?	r distriissed from uno	trici conege or a	iniversity:	
Employment Experience (include mili	tary service): List in chronol			, :				
Employer		A	ddress		position		from onth year	to month yea
					·		,	
I certify that to the best of my knowle refund. I further understand that it is r						nds for refusal or	dismissal wit	hout recourse o
				Date	S	ign your name afte	er reading the	above statement
				BELOW THIS LINE				
		entr level year	_	6 test 1 scores	1	adm cn entr gpa		
	deg sought	year undg coll		test 2	·	entr gpa		
		9 undg deg		scores	2	states	date	
	major	hi degree						
	adm type	college		app fee	e paid		gradshar	eauj10/16/13