

# GRADUATE APPLICATION FOR ADMISSION



**KANSAS WESLEYAN UNIVERSITY**

100 E. Claflin Ave, Salina, Kansas 67401 **TOLL FREE** 800.874.1154 **PHONE** 785.827.5541x1285 **EMAIL** admissions@kwu.edu **WEBSITE** www.kwu.edu

## **APPLICATION INSTRUCTIONS**

**PLEASE READ CAREFULLY BEFORE FILLING OUT THE APPLICATION**

*Please type or print clearly.*

### **APPLICATION**

Please complete the entire Application for Admission and send it directly to: Office of Enrollment and Financial Services, Kansas Wesleyan University, 100 E. Claflin Ave. Box 19, Salina, KS 67401.

### **APPLICATION FEE**

A **\$30.00 non-refundable** application fee made payable to KWU must accompany this application. This fee must be received before your application will be processed.

### **TRANSCRIPTS**

Applicants must possess a baccalaureate degree from a regionally accredited college or university. An official transcript is required from the institution from which the student received their undergraduate degree.

### **NOTIFICATION OF ADMISSION TO THE UNIVERSITY**

When all required official credentials have been received, the student will be notified of the decision for admission by letter on a rolling basis.

### **FINANCIAL ASSISTANCE**

If you wish to apply for financial assistance please mark the appropriate box under the financial data section of this application. To receive financial assistance you must complete the Free Application for Federal Student Aid (FAFSA). If you are eligible for veteran's benefits, please contact KWU's Office of Enrollment and Financial Services.

## PERSONAL DATA

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  Male  Female

Preferred Name \_\_\_\_\_ Former Last Name(s) (if any) \_\_\_\_\_

Permanent Address \_\_\_\_\_  
NUMBER, STREET OR BOX CITY STATE ZIP

Mailing Address (if different) \_\_\_\_\_  
NUMBER, STREET OR BOX CITY STATE ZIP

E-mail Address \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_ Mobile Phone (\_\_\_\_\_) \_\_\_\_\_

Are you a Citizen of the United States of America?  Yes  No If No, what is your Alien Registration Number: \_\_\_\_\_

If No and you do not have an Alien Registration Number, please request an International Application for Admission.

Have you ever been convicted of a felony?  Yes  No

If Yes, please explain the felony conviction on a separate sheet of paper and submit with this application. A complete set of court documents showing successful rehabilitation is required for Admission to the University.

### STATISTICAL INFORMATION

Marital Status:  Single  Married  Divorced  Separated  Widowed

Ethnic Background:  Hispanic American  Native American Indian/Alaskan Native  Caucasian  
 African American  Asian American/Pacific Islander  Other \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

How did you hear about KWU?  Radio Ad  TV Commercial  Print Ad  Recruitment Materials  
 Friend  Relative  Website  Other \_\_\_\_\_

## EMERGENCY CONTACT DATA

Name \_\_\_\_\_ Your relationship with this person \_\_\_\_\_

Address \_\_\_\_\_  
NUMBER, STREET OR BOX CITY STATE ZIP

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_ Mobile Phone (\_\_\_\_\_) \_\_\_\_\_

## FAMILY DATA

List other family members below:

Name	Brother/Sister	School Grade	H.S. Graduation Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have any members of your family ever attended KWU?  Yes  No

If yes, please give the name(s) and how you are related \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the name of your hometown newspaper(s)? \_\_\_\_\_

Newspaper address \_\_\_\_\_  
NUMBER, STREET OR BOX CITY STATE ZIP

## APPLICATION DATA

What semester/year do you plan to enter KWU?  Fall (August) 20\_\_\_\_  Spring (January) 20\_\_\_\_  Summer (May) 20\_\_\_\_

Check one:  Full-Time Student (9 credit hours or more)  Part-Time Student (less than 9 credit hours)

Have you ever attended Kansas Wesleyan University before?  Yes  No If yes, year(s) \_\_\_\_\_

## FINANCIAL DATA

Have you completed the Free Application for Federal Student Aid (FAFSA)?  Yes  No

Does your place of employment offer an employee tuition reimbursement program in which you will participate?  Yes  No

Are you currently in default on any student loan?  Yes  No

Are you a veteran?  Yes  No Are you eligible for VA Benefits?  Yes  No

## HOUSING DATA

Do you intend to live  On Campus  Off Campus in Salina  Commute

# EDUCATION DATA

Name of High School \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Graduation Date (month/year) \_\_\_\_\_ or GED Score (month/year) \_\_\_\_\_

Have you taken the Graduate Management Admissions Test(GMAT)?  Yes  No When? \_\_\_\_\_

Have you taken the Graduate Record Exam(GRE)?  Yes  No When? \_\_\_\_\_

Did you request that your scores be sent to KWU?  Yes  No

Are you currently in college or have you ever attended college?  Yes  No

• All colleges ever attended must be listed below! (If you need more space, list on a sperate sheet.)

NAME OF COLLEGE/UNIVERSITY	CITY/STATE	ATTENDED MONTH/YEAR - MONTH/YEAR	APPROX. HRS. EARNED
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NAME OF COLLEGE/UNIVERSITY	CITY/STATE	ATTENDED MONTH/YEAR - MONTH/YEAR	APPROX. HRS. EARNED
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NAME OF COLLEGE/UNIVERSITY	CITY/STATE	ATTENDED MONTH/YEAR - MONTH/YEAR	APPROX. HRS. EARNED
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NAME OF COLLEGE/UNIVERSITY	CITY/STATE	ATTENDED MONTH/YEAR - MONTH/YEAR	APPROX. HRS. EARNED
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• Official transcripts must be sent by mail directly from the Registrar's Office where your bachelor degree was conferred to the Office of Enrollment and Financial Services at KWU.

If you have been out of school for any period of time since graduation from college, complete the following concerning employment during this time:

EMPLOYER

CITY-STATE

TYPE OF WORK

DATES


Are you currently under academic or disciplinary dismissal, suspension, probation or other similar action at any college or university?  Yes  No

If Yes, please explain the academic or disciplinary dismissal, suspension, probation or other similar action.

\_\_\_\_\_

\_\_\_\_\_

# AGREEMENT

I certify that, to the best of my knowledge, all information submitted in this application is true and correct. I understand that failure to present accurate information may render this application null and void. I also understand that the information I have provided may be used for statistical purposes by other authorized offices and agencies. If accepted to Kansas Wesleyan University, I agree to abide by the regulations of the institution and will support the values stated in the mission of KWU.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Your non-refundable application fee must be received before processing of this application can begin.

Please submit a **\$30.00 non-refundable** application fee with this application.

If you have a friend who is interested in the graduate program at Kansas Wesleyan University, please list his/her name.

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ High School or College \_\_\_\_\_