

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
YOUNGSTOWN, OHIO 44555
APPLICATION FOR GRADUATE PROGRAM ADMISSION**

If you have never attended the Graduate School at YSU, please return this application with a \$30 nonrefundable application fee to the Bursar's Office, Youngstown State University, One University Plaza, Youngstown, OH 44555-0001

Social Security Number	Last Name	First Name	Middle Name	Former Name
Mailing Address		Female Male Birthdate (month, day, year)		
City	State	Zip	Home Telephone ()	
County			Work Telephone ()	
Permanent Address (if different)				
City	State	Zip	E-mail address	
County			Selective Service Number or	
Are you a resident of Ohio? Yes No				
How long have you resided at your permanent address? (years and months)				
Reason for exemption				
Name of Spouse or Next of Kin				
Relationship				
Address				
Indicate your citizenship: United States Foreign				
If foreign, what is your country of citizenship?				
If you have resided at your permanent address less than one year, list your previous address, including dates (month and year) for the past year:				
Previous Address				
City	State	Zip	country of birth? city of birth	
County	From	To	type of visa presently held?	
Please check one of the following: Race/Ethnicity Optional: (Required for federal reports by the Civil Rights Act of 1964):			Where did you hear about the YSU School of Graduate Studies?	
Black/Non-Hispanic Hispanic			YSU undergraduate graduate school fair (location)	
Asian/Pacific Islander White/Non-Hispanic			friend/family	
American Indian/Alaskan Native All Others			Graduate School Guide media advertisement flyer	
			other	

Educational Data: List all colleges attended in chronological order, including Youngstown State University.

Name of Institution	City and State	from month	year	to month	year	degree earned if any

Semester you wish to enter:	Entrance test taken: GRE MAT GMAT	Date test taken	Master's Program	For Master Teacher Programs, indicate teaching specialty:
Fall				
Spring				
Summer				
Disability that may require special services? Yes No			Education candidates: Attach copies of teaching certificates held.	
Transient student from another graduate school attending YSU for one semester			Non degree Graduate Certificate Program	
			Have you ever attended another graduate school? Yes No	
			If yes, where?	
			Have you ever been suspended or dismissed from another college or university?	
			Yes No If yes, when?	

Employment Experience (include military service): List in chronological order.

Employer	Address	position	from month	year	to month	year

I certify that to the best of my knowledge the information given in this application is true. I understand that any misrepresentation of facts is grounds for refusal or dismissal without recourse or refund. I further understand that it is my responsibility to arrange for all admission materials to be received by the Graduate Studies Office.

Date _____ Sign your name after reading the above statement _____

DO NOT WRITE BELOW THIS LINE

birth	_____	r	_____	entr level	_____ 6 _____	test	_____	adm cnd	_____
res	_____	ent sem/yr	_____	year	_____	scores	_____	entr gpa	_____
res city	_____	deg sought	_____	undg coll	_____	hi deg	_____	status	_____
c-f	_____	school	_____ 9 _____	undg deg	_____	college	_____	stat eff date	_____
cit	_____	major	_____	employer	_____	app fee paid	_____		
visa	_____	adm type	_____	disability	_____				