

IGNATIUS UNIVERSITY

Graduate Admission Application (type all information)

Name _____

Date of Birth _____ M _____ F _____ Social Security Number* _____

Current mailing address _____

City _____ State _____ Zip _____

Code _____ Country _____

Telephone Numbers: Home _____ Business _____ Fax _____

Email _____

What Country are you a citizen of ? _____

Ethnicity (Optional): _____ American Indian/Alaskan Native

_____ Asian/Pacific Islander

_____ Black/Non-Hispanic

_____ Hispanic/Non-Puerto Rican

_____ Puerto Rican

_____ White/Non-Hispanic

_____ Other

Religion (Optional): _____

Degree Sought:

School of Theology:

_____ M.Div. _____ M.S. _____ M.A. _____ S.T.M. _____ D.Min. _____ S.T.D. _____ Ph.D.

Program Name _____

School of Philosophy:

_____ M.Phil. _____ D.Phil. _____ Psa.D.

Program Name _____

School of Psychology

_____ M.S. _____ Ed.D. _____ Psy.D. _____ Phil.D. _____ Psa.D.

Program Name _____

School of Diplomacy

_____ M.S. _____ Ed.D. _____ Ph.D _____ Phil.D.

Program Name _____

Graduate and Undergraduate Institutions

List previous institutions attended in chronological order.

Institution _____

Address _____

From _____ to _____ . Degree _____ Date _____ Major

Field _____

Institution _____

Address _____

From _____ to _____ . Degree _____ Date _____ Major

Field _____

Institution _____

Address _____

From _____ to _____. Degree _____ Date _____ Major
Field _____

Work Experience

Attach a full resume.

Academic Honors, Awards, or Publications

Attach a separate page where relevant.

Letters of recommendation

Provide the names and addresses of three persons who have agreed to write letters or recommendation .Enclosed is a copy of the recommendation form. Please photocopy and send to each person. It is your responsibility to ensure that all required credentials are sent. Graduate Admissions cannot inform you of missing items.

1. _____

2. _____

3. _____

IGNATIUS UNIVERSITY does not discriminate on the basis of gender, race, age, handicap, national origin or creed in administration of any of its policies.

I have read in its entirety the information on IGNATIUS UNIVERSITY including the material on history, mission, accreditation, degree requirements, grades and fees. I certify that this information on this application and attachments is complete and correct. I understand that omission or falsification may constitute grounds for denial of admission or dismissal.

Date Submitted Signature of Applicant Social Security Number*

*Social Security Number: You are requested to give your social security number voluntarily, which will be used to process your application. If you enroll in the university, your social security number will be your student identification number and will be used for registration and general administrative purposes. If you choose not to give your social security number, an identification number will be assigned.