



\$30.00 Graduate Application Fee Required (non-refundable)
ONLINE application available at www.deltastate.edu/apply

GRADUATE APPLICATION FOR ADMISSION

PLEASE PRINT OR TYPE, AND FILL IN ALL BLANKS.

Full Name (Last) (First) (Middle)

E-mail Address

Permanent Address

(City) (State) (Zip Code) (County) (Nation, if not U.S.)

Mailing Address

(City) (State) (Zip Code) (County) (Nation, if not U.S.)

Cell Phone () - Are you a legal resident of Mississippi? Yes No

Social Security Number (Or DSU 900#, if applicable) Date of Birth (MM/DD/YYYY)

IN ORDER TO ACCURATELY RESPOND TO REQUESTS FROM A VARIETY OF FEDERAL, STATE, AND COMMUNITY ENTITIES, DSU ASKS YOU TO ANSWER THE FOLLOWING QUESTIONS:

Gender: Female Male Other Religious Affiliation:

Marital Status: Single Married Separated Divorced Widowed

- 1. Do you consider yourself to be Hispanic/Latino? Yes No
2. In addition, select one or more of the following racial categories to describe yourself: White Asian Black or African American American Indian or Alaska Native Native Hawaiian or Pacific Islander
3. Select the answer that best describes either parent's highest level of education completed. Less than High School diploma Associate Degree Doctoral or Professional Degree GED/High School diploma Bachelor Degree Some college coursework/no degree Master or Specialist Degree

LIST ALL PRIOR COLLEGES/UNIVERSITIES ATTENDED, LISTING MOST RECENT FIRST, INCLUDE ANY ATTENDANCE AT DELTA STATE UNIVERSITY.

Table with 4 columns: INSTITUTION, STATE, DEGREE, DATES OF ATTENDANCE

ADMISSIONS DOCUMENTS

The completed application, application fee, immunization records and transcripts from the college/university where you received your bachelor's degree and from all colleges/universities where you received graduate credit should be sent to the following address: Office of Graduate & Continuing Studies Delta State University Kent Wyatt Hall 239 Cleveland, MS 38733

If required by the degree program, letters of recommendation and other supporting documents should be submitted to the Office of Graduate Studies. Please contact us at 662.846.4700 or via email at grad-info@deltastate.edu.

(OVER)

CHECK _____ YOUR PROPOSED PROGRAM OF STUDY:

MAS MASTER OF APPLIED SCIENCE
_____ Geospatial Information Technology

MA-LS MASTER OF ARTS IN LIBERAL STUDIES
_____ Liberal Studies

MAT MASTER OF ARTS IN TEACHING
_____ Secondary Education
_____ Elementary Education
_____ Special Education
_____ Non Licensure
_____ Secondary Education
_____ Elementary Education

MBA MASTER OF BUSINESS ADMINISTRATION
_____ Business Administration
_____ Integrated Master of Business Administration

MCA MASTER OF COMMERCIAL AVIATION
_____ Commercial Aviation

MED MASTER OF EDUCATION
_____ Counseling
_____ Clinical Mental Health
_____ School Counseling
_____ Secondary Education
_____ Art
_____ English
_____ History
_____ Social Science
_____ Educational Administration & Supervision
_____ Public School
_____ Independent School
_____ Elementary Education
_____ Health, Physical Education, & Recreation
_____ Special Education

MPAC MASTER OF PROFESSIONAL ACCOUNTANCY
_____ Accountancy

MS MASTER OF SCIENCE
_____ Community Development
_____ Sports and Human Performance
_____ Exercise Science
_____ Human Performance
_____ Sports Administration/Management

MSN MASTER OF SCIENCE IN NURSING
_____ Nursing
_____ Nurse Administrator
_____ Nurse Educator
_____ Nurse Practitioner

CERT POST-MASTER'S
_____ Nursing
_____ Family Nurse Practitioner
_____ Nurse Administrator
_____ Nurse Educator (Fast Track)

MSNS MASTER OF SCIENCE IN NATURAL SCIENCE
_____ Biological Sciences
_____ Physical Sciences

MSJC MASTER OF SCIENCE IN SOCIAL JUSTICE & CRIMINOLOGY
_____ Social Justice and Criminology

EDS EDUCATION SPECIALIST
_____ Counseling
_____ Education Administration & Supervision
_____ Elementary Education

DNP DOCTOR OF NURSING PRACTICE
_____ Nursing
_____ BSN (Post RN)
_____ Post BSN
_____ Post MSN

EDD DOCTOR OF EDUCATION
_____ Professional Studies
_____ Counselor Education
_____ Curriculum & Instruction
_____ Educational Leadership
_____ Elementary Education
_____ Higher Education

NON NON-DEGREE
_____ Graduate Student
_____ Arts & Sciences
_____ Business & Aviation
_____ Education & Human Sciences
_____ Nursing

SELECT YOUR ENTRY TERM: () Fall 20__ () Spring 20__ () Summer I 20__ () Summer II 20__

I hereby make application for admission to Delta State University and I agree to abide by the regulations of the University and to accept responsibility for payment of all charges incurred while I am a student. I further declare that the information on this application is complete and accurate.

APPLICANT'S SIGNATURE _____ **DATE** _____

Delta State University is committed to a policy of equal employment and educational opportunity. Delta State University does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. This policy extends to all programs and activities supported by the University.

Revised January 2018