

GRADUATE ADMISSION APPLICATION

1. Term for which you are applying: Fall Winter Spring Summer Year: 20_____
2. Have you ever attended EWU before? Yes No If yes, last term attended: _____
3. EWU ID (if known): _____

PERSONAL DATA

4. Legal name (Last, First Middle):		5. Former names:		6. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
7. Social Security number: Please see disclosure statement on the following page.		8. Date of birth:		9. E-mail address:	
10. Current mailing address, city, state and ZIP:			10a. County:		10b. Contact telephone:
11a. Permanent mailing address (if different from above):			11b. Work telephone:		11c. Alternate telephone:
12a. Are you a resident of Washington? <input type="checkbox"/> Yes <input type="checkbox"/> No		12b. If yes, on what date did you begin living in Washington?		13. Are you a military veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
14a. Are you a United States citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, country of citizenship: _____		14b. If no , are you a US permanent resident? <input type="checkbox"/> No <input type="checkbox"/> Yes; permanent residency card number: _____		14c. If you answered no to both 14a and 14b, please submit a Supplemental International Application .	

ETHNICITY/RACE INFORMATION (OPTIONAL)

<p>15. What is your ethnicity?</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Non-Hispanic or Non-Latino</p>	<p>16. How do you describe your race?</p> <p><input type="checkbox"/> American Indian or Alaska Native (R1) (Print the name of your enrolled or principal tribe) _____</p> <p><input type="checkbox"/> Asian (R2) (Please indicate one group) _____</p> <p><input type="checkbox"/> Black/African American (R3)</p> <p><input type="checkbox"/> Native Hawaiian or Pacific Islander (R4) (Please indicate one group) _____</p> <p><input type="checkbox"/> White (R5)</p> <p><input type="checkbox"/> Other (Please print) _____</p>
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EDUCATIONAL BACKGROUND

17. List all colleges or universities in order of attendance, most recent first.

Institution	City and state	Start date	End date	Degree earned	Major

PROGRAM INFORMATION

18. Name and code of the graduate degree or certificate program to which you seek admission (see program code list):

Program name: _____ Code: _____--_____

REFERENCES

19. Please list the names and address of three references who could comment on your preparedness for graduate study.

Name	Address, city, state and ZIP	Position

ADDITIONAL ITEMS TO BE SUBMITTED WITH THIS APPLICATION

20. Submit this form and the application fee to the Graduate Studies Office, along with any of the other items listed below that are required for your application. Please refer to program-specific information in the EWU catalog or online for other required supplemental materials, such as recommendation letters, to be submitted directly to the department to which you are applying.

Item	Description	Enclosed	Requested
Fee	\$50 non-refundable application fee	<input type="checkbox"/>	
GMAT	Graduate Management Admission Test: all MBA applicants must submit a GMAT score. Date taken _____ or will take _____	Test scores must be received directly from the testing service.	<input type="checkbox"/>
GRE	Graduate Record Examination: not required for all programs; please check departmental requirements. Date taken _____ or will take _____	Test scores must be received directly from the testing service.	<input type="checkbox"/>
Official transcripts	Two official transcripts from each institution attended, unless those transcripts are already on file at EWU	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental international application	For international applicants only	<input type="checkbox"/>	

ACKNOWLEDGEMENT AND SIGNATURE

21. Have you ever been required to register as a sex offender by any legal authority within the US? Yes No

22. I certify that to the best of my knowledge, all statements I have made in this application are complete and true. I understand that any falsification of information or failure to submit two complete transcripts from all colleges and universities I have attended may result in the denial of this application or my subsequent dismissal from EWU.

Signature: _____ Date: _____

DISCLOSURE STATEMENT

Eastern Washington University complies with laws prohibiting the use of Social Security numbers (SSN) as the primary student ID. However, a SSN is required for financial aid, student employment and tax reporting to the IRS. Students' records and information are handled in accordance with applicable state and federal laws.

Optional: How did you hear about EWU Graduate Studies? _____

PROGRAM CODE LIST

Please use the following codes to provide program information on the graduate admission application.

Graduate Certificates

Disability Studies	MCR-DSST
Health Services Administration	MCR-HSAD
Professional Teaching Certificate	MCR-PROCERT
Public Management	MCR-PADM
Teaching of Literature	MCR-LITE
Teaching of Writing	MCR-WRIT

Post-Master's Certificate

School Psychology (joint program with WSU)	MCR-SCHCEDP
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Doctor of Physical Therapy

Physical Therapy	DPT-PT
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Master of Arts

College Instruction	
English:	
Literature	MA-LITE
Rhetoric, Composition and Technical Communication	MA-RHET
Teaching English as a Second Language	MA-TESL
History	MA-HIST
Interdisciplinary	
Music:	
Composition	MA-MUSC MCMP
General (non-specific)	MA-MUSC GENR
Music Education	MA-MUSC MUED
Performance (instrumental/vocal)	MA-MUSC PERF

Master of Business Administration

Business Administration	MBA-BUSADM
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Master of Education

Adult Education	MED-EDAE
Computer and Technology Supported Education	MED-CSTECHEd
Curriculum and Instruction	MED-CURI
Educational Leadership	MED-EDLE
Foundations of Education	MED-EDFD
French	MED-FREN
Instructional Media and Technology	MED-EDIM
Literacy Specialist	MED-EDLS
Secondary Teaching	MED-CURIWCT
Special Education	MED-SPECED
Teaching K-8	MED-ELEMWCT

Master of Fine Arts

Creative Writing	
Poetry	MFA-CRWR POET
Non Fiction	MFA-CRWR NFCT
Fiction	MFA-CRWR FICT

Master of Nursing

Nursing	MN-NURS
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Master of Occupational Therapy

Advanced Standing MOT	MOT-OTAS
Occupational Therapy	MOT-OCTH

Master of Public Administration

Advanced Standing MPA	MPA-PAAS
Public Administration	MPA-PADM

Master of Science

Applied Psychology:	
Mental Health Counseling	MS-APSYC MHLC
School Counseling	MS-APSYC SCHC
School Psychology (joint program with Psychology)	MS-SCHCEDP
Biology	MS-BIOL
College Instruction	
Communication Disorders	MS-COMD
Communications	MS-COMMS
Computer Science:	
Computational Systems	MS-COMPSC CPUS
Software Systems	MS-COMPSC SOFT
Interdisciplinary	
Mathematics:	
Applied Mathematics	MS-MATH APMA
General Mathematics	MS-MATH
Secondary Teaching	MS-MATH SSIN
Community College Teaching	MS-MATH CCIN
Physical Education:	
Administration/Pedagogy	MS-PHED PEDA
Exercise Science	MS-PHED EXSC
Sports and Exercise Psychology	MS-PHED SPSY
Psychology:	
Clinical	MS-PSYC CLPS
Experimental/General	MS-PSYC EXPS
School Psychology (joint program with Applied Psychology)	MS-SCHPSYC

Master of Social Work

Advanced Standing MSW	MSW-SWAS
Social Work	MSW-SOWK

Master of Urban and Regional Planning

Urban and Regional Planning	MURP-URPL
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