

**COLUMBUS STATE UNIVERSITY**

**International  
Graduate  
Application**

**It's your life.**

*It's your world. It's your classroom. Take part in it.*

## APPLICATION PROCEDURES

1. Please print all entries except your signature.
2. Submit this Application for Admission form, accompanied by a \$30 non-refundable application fee, to the Admissions Office. A check or money order should be made payable to CSU; the university is not responsible for cash sent through the mail.
3. Applicants seeking admission to a Master's program must request that an official transcript from each International college or university attended be sent directly to a NACES approved organization for a professional evaluation. ([www.naces.org](http://www.naces.org))
4. All applicants requesting admission to a graduate program are required to submit official test scores on an entrance examination appropriate to the degree objective. Applicants for a Master of Education degree, a Master of Science degree, a Master of Public Administration degree, and a Specialist in Education degree must submit scores of the Graduate Record Examination (GRE). Applicants for a Master of Business Administration degree must submit scores of the Graduate Management Admission Test (GMAT). Requests for GMAT and GRE scores may be sent to ETS at the following addresses:

Graduate Management Admissions Test  
Graduate Record Examination

ETS, Box 966, Princeton, NJ 08540  
ETS, Box 966, Princeton, NJ 08540

In addition, if English is not student's native language, a Test of English as a Foreign Language (TOEFL) is required for admission, unless the applicant's undergraduate degree was from a U.S. university.

Applicants who wish to take any of these examinations on the CSU campus should contact the Testing Center at (706) 568-2226. GRE and GMAT scores from tests taken more than five years prior to application for admission will not be accepted.

5. Applicant must submit a completed Certificate of Immunization. Forms are available online at: <http://admissions.colstate.edu/forms.htm>
6. A financial guarantee form must be submitted along with an official bank statement showing availability of funds for an academic year (Fall and Spring semesters). Forms could be downloaded from the website at: <http://admissions.colstate.edu/forms.htm>
7. Data such as ethnic origin, sex, and handicap are used for statistical reporting and will not be used in any way for rendering admission decision.
8. Action will not be taken on the application until all the credentials listed above have been received.
9. International applicants are to meet the following deadlines (all the necessary documents need to be submitted by the appropriate date):

Fall semester	–	June 1st
Spring semester	–	November 1st
Summer semester	–	April 1st

**FOR OFFICE USE ONLY**

Receipt No. \_\_\_\_\_

Date Rec'd \_\_\_\_\_

Resident  Waiver

Non-Resident

# International Graduate Admission Application



COLUMBUS STATE  
UNIVERSITY

Please read application procedures.  
Please print all information and check the appropriate boxes.  
Do not write in the shaded boxes.  
A one-time \$30 application fee is required

Admissions Office ■ Columbus State University  
4225 University Avenue ■ Columbus, GA 31907-5645 ■ (706) 507-8800

(For applicants requesting an I-20 form and requiring a student visa)

If you are a U.S. citizen or have permanent resident status, please contact the CSU Admissions Office for a U.S. student application packet.

## APPLICANT INFORMATION

Name \_\_\_\_\_  
**U.S. Social Security Number** \_\_\_\_\_  
 (If available) *Last First Middle Jr.*

**Place of Birth** \_\_\_\_\_  
*City Country Country of Citizenship*

**Permanent Address** \_\_\_\_\_  
*Number and Street Work Telephone Home Telephone (Country Code, City Code, Numbers)*  
 \_\_\_\_\_  
*City State Zip + 4 Country*

**Mailing Address** \_\_\_\_\_  
 (or check if same as above) o *Number and Street Telephone (Country Code, City Code, Numbers)*  
 \_\_\_\_\_  
*City State Zip + 4 Country*

Former/Maiden Name (if applicable) \_\_\_\_\_  
*Last First*

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

**Date of Birth** \_\_\_\_\_  
 (Month, day, year)  
**Sex** (M)  Male  
 (B)  Black or African-American  
 \_\_\_\_\_  
 (F)  Female  
 (I)  American Indian or Native Alaskan

Native Language  
 English  Other \_\_\_\_\_  
 Specify

**Ethnic Origin** (Check all that apply)  
 Ethnic origin OPTIONAL for admission but REQUIRED prior to enrollment.  
 (A)  Asian or Pacific Islander  
 (H)  Hispanic or Latino  
 (W)  White  
 (M)  Multi-Racial

**If you are currently in the U.S., your immigration status:**  FI International Student  Other (Specify) \_\_\_\_\_

## ADMISSIONS INFORMATION

**Year and Semester You Plan To Enter:**  Fall  Spring  Summer 20 \_\_\_\_\_

**Classification:**  Degree Seeking  Transient

**Examinations:**  
 Graduate Management Admission Test (GMAT)  Graduate Record Exam (GRE)  Miller Analogies Test (MAT)

**FOR OFFICE USE ONLY**

Decision \_\_\_\_\_ Date \_\_\_\_\_ Int. \_\_\_\_\_ Classification \_\_\_\_\_ Degree Sought \_\_\_\_\_  
 Major \_\_\_\_\_ Test Scores \_\_\_\_\_ UGRAD Degree \_\_\_\_\_ Date \_\_\_\_\_  
 UGRAD GPA \_\_\_\_\_ Last 2 yrs GPA \_\_\_\_\_ GRAD Degree \_\_\_\_\_ Date \_\_\_\_\_

**All Previous Educational Experience**

(Include prior attendance at CSU.)

Table with 7 columns: Institution, Location City, State, Dates of Attendance From To, Graduation Date, Major, Degree Obtained. Includes four rows for 'Last College', 'College', 'College', and 'College'.

**INTENDED PROGRAM OF STUDY**

**Please check intended Master's Program**

- Master of Business Administration (MBA)
Master of Public Administration (MPA)
Master of Science (MS) in: Applied Computer Science, Applied Computer Science On-line Track, Community Counseling, Environmental Science, Public Health, Instructional Technology
Master of Music (MM) in: Artist Diploma (Certificate), Music Education
Concentration: Conducting (Choral and Instrumental)
General Music, Pedagogy

Do you hold a valid teaching certificate? [ ] Yes [ ] No If yes, what state?
Type (level) of certificate Area (field) of certification

**Please check intended Specialist in Education Program (EdS)**

- Early Childhood Education
Educational Leadership
Middle Grades Education
Secondary Education
English Language Arts
History
Mathematics
Science

**Teaching Experience Must Be Verified By Superintendent of Schools for EdS Applicants:**

Number of Years of Experience: Field of Experience:
Signature of Superintendent City State Date

**ADDITIONAL INFORMATION**

- 1. Have you ever applied to CSU as an undergraduate or graduate student?
2. Have you ever been enrolled at CSU as an undergraduate or graduate student?
3. Are you currently enrolled in the last institution attended?
4. Telephone number where you can be reached during the day
5. State briefly why you want to attend CSU
6. If you will need any special services while on campus because of a disability, please contact our Office of Disability Services at 568-2330.

All applications and documents required must be received in the Admissions Office by the published deadline date.

**CERTIFICATION**

I agree to abide by CSU regulations. I certify that the information furnished in this application is complete and true.

Signature Date

