

Graduate Admissions

APPLICATION FOR GRADUATE ADMISSION

Applicants are required to supply all requested information and return this application with a one-time, nonrefundable application fee (\$45.00 for domestic applicants/\$55.00 for international applicants) to:

Austin Peay State University Graduate Admissions P.O. Box 4458 Clarksville, TN 37044

Online applications are preferred. To apply online, visit the College of Graduate Studies website at http://www.apsu.edu/grad-studies/ and click the "Apply for Graduate Admission" link in the upper left corner. Additional departmental admission requirements may also be found on the College of Graduate Studies website.

PLEASE PRINT CLEARLY 1A. If you are you a current or fori	nar APSII studant nlagsa n	rovida vour APSILI D			
		Tovide your AFSO i.d.			
1B. Last four of Social Security Nur	nber (for tracking purposes	only):			
2. Name	First	Middle	Maiden		
3. Permanent address (Local addre			Marach		
`		sinceric.)			
Address:Street/P.O. Box/Apt. #	City	State	Zip Code		
County: Home Ph	one: () Alt	ernate Phone: ()			
4. Mailing address (Local address r	needed if military or depende	ent.)			
Address:	•	,			
Street/P.O. Box/Apt. #	City	State	Zip Code		
County: Home Ph	one: () Alt	ernate Phone: (
5. Email					
6. Date of birth (mo/day/year)		7. Gender (optional)Ma	aleFemale		
8. Are you Hispanic/Latino?	_YesNo				
9. Select one or more races	Asian	Native Hawaiian or	other Pacific Islander		
	American Indian	Black or African-An	Black or African-American		
	White	Alaska Native			
10. Citizenship (Please check one):					
U.S. citizen					
Permanent Resident: residen	t alien (RA) #:	If RA; please submit a copy of y	our resident alien card.		
		citizenship:			
Country					

11. Colleges and universities previously attended. (Please **DO NOT** abbreviate.) List **ALL** colleges previously attended, including APSU (Clarksville Campus, Springfield Campus, and Fort Campbell), in chronological order.

Dates Attended

First-Time Graduate StudentReadmit Graduate StudentTransient Student	Name of Institution	City		e.g. B.A., B.S.N.)	From	To Name un	be issued
4. Please indicate where and when you will first enroll (check only one) A. Please indicate where and when you will first enroll (check only one) Itstin Peay Clarksville Campus: Year 20							
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4. Please indicate where and when you will first enroll (check only one) A. Please indicate where and when you will first enroll (check only one) Itstin Peay Clarksville Campus: Year 20	12. Are you currently enrolled	at any of the ab	ove institut	ions? Yes	No)	
A. Please indicate where and when you will first enroll (check only one)		•					
Spring (January-March)				-		, , ,	
		-	`				
Lustin Peay Center @ Fort Campbell/Springfield Campus: Year 20							
Fall I (August-October)Fall II (October- December)Spring I (January-March)Spring II (March-May)Summer III (May-July) 15. Entry level (check one)First-Time Graduate StudentReadmit Graduate StudentTransient StudentSenior ISenior IIInternational StudentGraduate Special/Non-Degree 16. U.S. Residents (Please choose one of the following) Do you live in the state of Tennessee?YesNoIf yes, how long have you lived here? (Please indicate the number of years.) Do you live in Allen, Calloway, Christian, Logan, Simpson, Todd, or Trigg counties in Kentucky?YesNo If yes, how long have you lived there? (Please indicate the number of years.) Fort Campbell military personnel claiming exemption from out-of-state tuition must provide Military Unit Address: Military Init Address: Relationship to Sponsor: Relationship to Sponsor: Relationship to Sponsor:			-				
Spring II (March-May)Summer III (May-July) 15. Entry level (check one) First-Time Graduate StudentReadmit Graduate StudentTransient Student Senior ISenior IIInternational StudentGraduate Special/Non-Degree 16. U.S. Residents (Please choose one of the following) Do you live in the state of Tennessee?YesNo If yes, how long have you lived here? (Please indicate the number of years.) Do you live in Allen, Calloway, Christian, Logan, Simpson, Todd, or Trigg counties in Kentucky?YesNo If yes, how long have you lived there? (Please indicate the number of years.) Fort Campbell military personnel claiming exemption from out-of-state tuition must provide Military Unit Address. Military Unit Address: Military family members must provide all of the information below. Name of Sponsor: Relationship to Sponsor:							
	15. Entry level (check one)						
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If yes, how long have you lived here? (Please indicate the number of years.)	16. U.S. Residents (Please choose of	ne of the following)				·	
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Name of Sponsor: Relationship to Sponsor:	Military Unit Ac	ldress:					
Name of Sponsor: Relationship to Sponsor:	•						
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	Biology (MS)		
	Communication Arts (MA)		
	☐ Media Management		Industrial-Organizational Psychology (MSIO)
	Marketing Communication		Management (MS)
	Computer Science & Quantitative Metho		History (MA)
	(MS/PSM)		Music (MMU)
	☐ Data Management & Analysis		☐ Music Education
	□ Predictive Analytics		☐ Music Performance
	☐ Information Assurance & Secur	ity	Nursing (MSN)
	☐ Mathematical Finance		Family Nurse Practicioner Number of Administrations
	☐ Math Instruction (MS only)		□ Nursing Administration
	Counseling (MS)		□ Nursing Education
	☐ Clinical Mental Health		Professional Studies (MPS)
	□ School Counseling		☐ Strategic Leadership
	Curriculum and Instruction (MAED)		Reading (MAED)
	☐ Advanced Studies		Social Work (MSW)
	 Instructional Technology 		Teaching (MAT)
	□ Math		☐ Elementary Education
	Educational Leadership Studies(MAED)		☐ Secondary Education
	Educational Specialist (EDS)		☐ Special Education
	 Administration and Supervision 		Certificate (graduate special/non-degree)
	Elementary Education		Community & Organizational Leadership
	Secondary Education		□ Data Science Certificate
	□ School Counseling		Post-Baccalaureate Certificate in Classics
	Engineering Technology (MSET)		Post Master's Family Nurse Practitioner
	English (MA)		Post Master's Nursing Administration
	Health Care Administration (MHA)		□ Post Master's Nursing Eduction
	Health and Human Performance (MS)	_	□ Post-Baccalaureate Certificate in Classics
	□ Performance Enhancement & C	oaching	
	□ Public Health Education		
	 Sport and Wellness Leadership 		
Consist Selectiv You m	ve Service (or certify exemption from the	rvice Act, Tennessee law ro registration requirement)	equires all male applicants to be registered with the prior to enrolling in state colleges and universities. pon which you claim exemption in Section 2. For
11101 € 11	ilorination, piease go to <u>www.sss.gov</u> .		
1. 2.	I certify that I am registered with the Se I certify that I am not required to be reg	•	
	I am female	I am a current memb	per of the Armed Forces on active duty
	I am younger than 18 years of age	I was born before 19	60
	I am an exempt Resident Alien	Other (please specify)	
19. Act	tive duty/Veterans/Family Members (F	For US residents only)	
-	re active duty, an AARTS, SMART, DD295 is required.	, or CCAF transcript is requ	nired. If you are a veteran, a DD Form 214 Member
Statue	(check one): Active Duty	Family Mambar	Veteran Retired Veteran

Date entered armed services:/	Date sepa	rated:/_	Military I.D. expiration date:/
Active Duty Use Only (Family Members/Retirees do no	ot complete):		
Pay Grade Unit Address	S		
Military Base	State	Unit Phone	e Years of Service
20. Professional work experience . Please incomplete whole number ranging from 0 to 50.		nber of years of	f professional work experience you have using a
21. How did you learn about APSU's College	of Graduate	Studies?	
 Billboard Friend or Family Member Newspaper Fort Campbell Education Center I am a current APSU student 			Internet (please specify): APSU Contact (please specify): Petersons.com Other (please specify):
application and certify that the statements I of all college work attempted or completed. In addition to the forgoing, the Tennessee E tuition or state financial aid to attest under lawfully present in the United States. By subs	I have made of Eligibility Veri The penalty of This a	on this applica ification for En of perjury that application, I a	the college or subject to dismissal. I have read this ation are correct and complete, including a report and the complete and complete, including a report antitlements Act requires an applicant for in-state the or she is either a United State citizen or alien attesting that I am either a United State citizen
that Tennessee law requires me to provide do public benefit. I understand that knowing representation shall subject me to liability u seq. I understand that if I am found to have m or I may be disciplined by Austin Peay State & By my signature, I certify that the information	ed by Tenness ocumentation gly and will under the Ten nade a false of University.	see law if I have a verifying the standing making nessee False Cormisleading standing this form is co	v state benefits including in-state tuition. ve applied for a state public benefit. I understand status indicated above prior to receipt of this state a false, fictitious, or fraudulent statement or Claims Act, Tennessee code Annotated 4-18-101 et tatement my state public benefit may be rescinded complete and true. If accepted, I agree to abide by Conduct, Graduate Bulletin and other University
publications. I also understand the application	on fee is noni	efundable.	Date:

Information for students with disability

If you have a learning or physical disability and want information on types of services and support that are available, please contact the Office of Disability Services at (931) 221-6230 voice, (931) 221-6278 TTY. It is recommended that students who many benefit from these services make early contact with the office so that appropriate accommodations can be arranged.

Please submit your completed application and application fee (\$45.00 for domestic applicants/\$55.00 for international applicants) to:

APSU Graduate Admissions, P.O. Box 4458, Clarksville, TN 37044