

GRADUATE SCHOOL

APPLICATION FOR ADMISSION



APPLICATION ID _____ (office use only) STUDENT NUMBER _____ (if attended Clarkson previously)

PLEASE TYPE OR PRINT CLEARLY.

Name Mr. Mrs. Miss Ms. _____ Date _____
Family/Surname Given/First Name Middle Name

Gender Male Female Preferred Name _____

Former names (if applicable) _____

Date of birth (mm/dd/yy) _____ / _____ / _____ Place of birth (city/state/country) _____ / _____ / _____

Language spoken at home _____

CITIZENSHIP (check only ONE)

- U.S. Citizen Social Security Number _____
- U.S. Permanent Resident (attach copy of both sides of Resident Alien card) Registration Number _____
- Non-U.S. Citizen Current Visa Status _____ (e.g. F-1, J-1, etc.) Country of Citizenship _____
- Refugee

OPTIONAL PERSONAL DATA FOR U.S. CITIZENS — RACE/ETHNICITY

Are you Hispanic or Latino (that is, a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race)? Circle YES or NO.

Select any other group or groups that apply to you. (Check all that apply): American Indian or Alaskan Native Black or African-American Asian
 White Native Hawaiian or other Pacific Islander

MILITARY SERVICE

Branch of Service _____ Rank _____ Dates of Service (mm/dd/yy) _____ / _____ / _____ to _____ / _____ / _____

CURRENT MAILING ADDRESS

Street Address/P.O. Box _____ District/Province _____

City _____ State _____ Country _____ Postal/Zip Code _____

Effective Dates: From (mm/dd/yy) _____ / _____ / _____ to (mm/dd/yy) _____ / _____ / _____

NOTE: All applicants must list their permanent home address if different from their current mailing address.

PERMANENT HOME ADDRESS

Street Address/P.O. Box _____ District/Province _____

City _____ State _____ Country _____ Postal/Zip Code _____

Preferred Telephone No. Cell Home Work Other _____

E-mail Address home campus other _____ Fax Number _____

First semester/year you wish to enroll: Fall (year) _____ Spring (year) _____ Summer (year) _____ . I hope to attend full time part time.

Degree toward which study is directed (check all that apply) ME/MBA M.E. M.S. M.S./Ph.D. Ph.D.

Name of graduate area, school and/or department in which study is planned _____

Area(s) of specialization in which study is planned, if known (see application instructions for details) _____

How, where or from whom did you learn about Clarkson? _____

For Office Use

GRE/GMAT _____ TOEFL/IELTS _____

List all colleges or universities attended. One copy of official transcripts or records at all higher educational institutions attended except Clarkson are required and must be sent to the appropriate Graduate Studies Office indicated on the application procedures page.

Institution	Location	Field of Study	Dates Attended	Degree (if any)	GPA
			_____ to _____		
			_____ to _____		
			_____ to _____		

Please attach a statement of purpose and resume with your application. Be sure to include professional or work experience; prizes, scholarships or other honors; societies or professional organizations of which you are a member; thesis, research reports or other publications; and career goals with respect to your intended graduate program.

In the boxes below, list the names and addresses of the individuals from whom you have requested recommendations. Letters of recommendation must be from three instructors or employers who can speak authoritatively regarding your aptitude and preparation for graduate study are required. Use the forms supplied for this purpose. This may also be completed online. If you are a Clarkson student, please list three faculty who know you and can evaluate your work.

1.

2.

3.

If you are also interested in applying to a graduate program in another department, please indicate below:

Do you wish us to consider this as an application for admission regardless of whether you secure an assistantship? Yes No

If you wish to apply for an assistantship, indicate preference by giving first and second choice _____ Teaching _____ Research

If you wish to be considered for a teaching assistantship, have you had any prior experience in this capacity or a similar one? Yes No

If yes, please attach a separate letter giving details.

Specify any outside financial assistance available to you: _____

I certify that the statements made in this application are true to the best of my knowledge. If admitted, I agree to abide by the rules and regulations of Clarkson.

Signature of Applicant

NOTE: This application and all correspondence concerning it should be sent to the appropriate Graduate Studies Office indicated on the application procedures page. Full-time applicants to the graduate school from within the U.S. and Canada are required to pay a \$25 application fee. All other full-time applicants are required to pay a \$35 application fee. This fee cannot be waived or deferred except for applicants from within the U.S. and Canada who apply for admission before December 31 for the following fall semester, or June 30 for the following spring semester. Part-time students and Clarkson alumni are not required to pay an application fee.