KENTUCKY STATE UNIVERSITY

Office of Graduate Studies, graduatestudies@kysu.edu; 502-597-4723

Application for Admission to Graduate Studies

OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By: _____

1. Full Legal Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE/MAIDEN)

2. Social Security Number/Identification Number (if available): _____

3. Addresses:

Current/Local _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Permanent _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

4. Telephone: _____ (Home) _____ (Work) _____ (Cell)

5. E-mail: _____

Reset Information

6. Citizenship: Citizenship: ☐ US ☐ Other: _____ VISA Type: _____
☐ Permanent Resident Alien Registration Number: _____

7. Residency: Is Kentucky your state of legal residence? ☐ No ☐ Yes: How long have you resided in Kentucky? _____

8. a. Gender: ☐ Male ☐ Female **b. Ethnicity:** ☐ American Indian or Alaska Native ☐ African ☐ Asian/Pacific Islander ☐ Black/African American ☐ Hispanic/Latino ☐ White, Non-Hispanic ☐ Other: _____
(This information will not be used in making admission decisions; however, it is necessary for record keeping purposes.)

Reset Ethnicity

9. Date of Birth: _____ (MM/DD/YYYY) Place of Birth: _____ (City, County, State/Province, Country)

10. Military Status: ☐ Non-Veteran ☐ Veteran ☐ Currently enlisted or commissioned ☐ National Guard ☐ Reserves
(Military status is important for reporting and financial aid purposes. This information will not be used in making admission decisions.)

Reset Mil Status

11. Employment History: (Most recent/current employer; attach resume or supplemental pages for complete history, if required by the program to which you are applying.) ***Does your current employer offer tuition assistance?*** ☐ Yes ☐ No

Employer	Address	From/To	Supervisor

12. Educational History: (Attach supplemental pages if needed.)

College	Address	From/To	Degree

13. Anticipated Enrollment Term: Year: _____ ☐ Fall (August) ☐ Spring (January) ☐ Summer (June)

14. Program and Degree Status: ☐ Non-degree seeking ☐ Degree seeking *Select one program for admission:*

☐ Masters of Science in Aquaculture
☐ Masters of Public Administration
☐ Master of Arts in Special Education
☐ Masters of Science in Computer Science Technology
☐ Masters of Business Administration
☐ Masters in Environmental Studies

15. Tests:

☐ GRE Date: _____ Scores: _____ ***Sent to KSU?*** ☐ Yes ☐ No

☐ GMAT Date: _____ Score: _____ ***Sent to KSU?*** ☐ Yes ☐ No

☐ TOEFL Date: _____ Score: _____ ***Sent to KSU?*** ☐ Yes ☐ No

16. Directions: Complete and submit the supplemental pages and appropriate Essay/Career Goals Statement and arrange for letters of reference. Also arrange to have official college transcripts sent. Pay the application fee and send all materials to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

A non-refundable application fee must either accompany this form or be paid through the KSU Bursar (it can be paid online). Consult the current Fee Schedule for the appropriate amount.

Reset This Page

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OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By: _____

Supplement Page for Application for Admission to Graduate Studies

Name: _____ _____
LAST FIRST

Social Security Number/Identification Number (if available): _____

17. References: List name, title, address, phone, and e-mail of individuals providing a reference for your graduate application.

Ref 1: Name: _____ _____ _____
LAST FIRST Title/Position

Address: _____ _____ _____ _____ _____
Number and Street City County State/Province Zip Code//Country

Telephone: _____ E-mail: _____

Ref 2: Name: _____ _____ _____
LAST FIRST Title/Position

Address: _____ _____ _____ _____ _____
Number and Street City County State/Province Zip Code//Country

Telephone: _____ E-mail: _____

Ref 3: Name: _____ _____ _____
LAST FIRST Title/Position

Address: _____ _____ _____ _____ _____
Number and Street City County State/Province Zip Code//Country

Telephone: _____ E-mail: _____

18. Emergency Contact:

Name: _____ _____ _____
LAST FIRST Relationship

Address: _____ _____ _____ _____ _____
Number and Street City County State/Province Zip Code//Country

Telephone: _____ E-mail: _____

19. Additional Employment History: This may be required by the program to which you are applying, please consult the instructions. (Begin with most recent employer; attach resume or additional pages for complete history.)

_____ _____ _____ _____
Employer Address From/To Supervisor

_____ _____ _____ _____
Employer Address From/To Supervisor

_____ _____ _____ _____
Employer Address From/To Supervisor

_____ _____ _____ _____
Employer Address From/To Supervisor

I understand that withholding information or giving false information on this application will result in ineligibility for admission to Kentucky State University. I certify that the above information is true, accurate, and complete.

Signature: _____ Date: _____

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Application for Admission to Graduate Studies

Personal Essay/Statement of Goals and Career Objectives

OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By: _____

Name: _____ _____
LAST FIRST

Social Security Number/Identification Number (if available): _____

Instructions: Please refer to the specific instructions for the program to which you are applying. Then provide your **personal essay** or **statement of goals and career objectives**, whichever is appropriate.

This PDF form allows you to type in the space below. You may attach a printed, typewritten copy instead. Please submit a typed copy.

Signature: _____ Date: _____

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KENTUCKY STATE UNIVERSITY

Office of Graduate Studies, graduatestudies@kysu.edu; 502-597-4723

Application for Admission to Graduate Studies
Transcript Request Form

OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By: _____

Full Legal Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE/MAIDEN)

Social Security Number/Identification Number (if available): _____

Addresses:

Current/Local _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Permanent _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Telephone: _____ (Home) _____ (Work) _____ (Cell)

Signature: _____ Date: _____

Transcript Request Form

To the Applicant: Please complete this form to the Registrar of each college or university you have attended. Request that an official transcript be sent to Kentucky State University.

Dates of Attendance: _____ (From/To) Degree: _____ Awarded: _____ (Date)

To the Registrar: The person identified above is applying for admission to graduate studies at Kentucky State University. Please send an official copy of the individual's transcript to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

Please include a signed copy of this form with the transcript.

Thank you.

Registrar Signature: _____ Date: _____

Printed Name: _____

School Name: _____

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OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By:_____

Application for Admission to Graduate Studies
Recommendation for Graduate Studies Form Reference 1

Full Legal Name: _____ LAST _____ FIRST _____ MIDDLE/MAIDEN

Address: _____ Number and Street _____ City _____ County _____ State/Province _____ Zip Code//Country

Telephone: _____ Home _____ Work _____ Cell

I am applying for admission to _____.

I agree that this recommendation will remain confidential, and **I ☐ waive / ☐ do not waive** my right to view it.

Signature: _____ Date: _____

The person named above is applying for admission to graduate studies at Kentucky State University. Please complete this form. You are welcome to attach a letter addressing any aspect of this person's experience or preparation that relates to the likelihood of the person's success in graduate studies. Please send this form and any additional comments to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

Rate the applicant from 1 to 5, where **1 =** superior, highly qualified for graduate studies; and **5 =** needs improvement in order to advance to the next level	1	2	3	4	5	No Basis
Intellectual ability	☐	☐	☐	☐	☐	☐
Writing ability	☐	☐	☐	☐	☐	☐
Speaking ability	☐	☐	☐	☐	☐	☐
Quantitative ability	☐	☐	☐	☐	☐	☐
Interpersonal skills	☐	☐	☐	☐	☐	☐
Ability to work independently	☐	☐	☐	☐	☐	☐

Place a check beside the one of the following:

___ I strongly recommend this candidate
___ I recommend this candidate
___ I recommend this candidate with reservations
___ I do not recommend this candidate

Attach any comments to this form.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

School Name: _____ Telephone: _____

E-mail: _____

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OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By:_____

Application for Admission to Graduate Studies
Recommendation for Graduate Studies Form Reference 2

Full Legal Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE/MAIDEN)

Address: _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Telephone: _____ (Home) _____ (Work) _____ (Cell)

I am applying for admission to _____.

I agree that this recommendation will remain confidential, and **I ☐ waive / ☐ do not waive** my right to view it.

Signature: _____ Date: _____

The person named above is applying for admission to graduate studies at Kentucky State University. Please complete this form. You are welcome to attach a letter addressing any aspect of this person's experience or preparation that relates to the likelihood of the person's success in graduate studies. Please send this form and any additional comments to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

Rate the applicant from 1 to 5, where **1 =** superior, highly qualified for graduate studies; and **5 =** needs improvement in order to advance to the next level	1	2	3	4	5	No Basis
Intellectual ability	☐	☐	☐	☐	☐	☐
Writing ability	☐	☐	☐	☐	☐	☐
Speaking ability	☐	☐	☐	☐	☐	☐
Quantitative ability	☐	☐	☐	☐	☐	☐
Interpersonal skills	☐	☐	☐	☐	☐	☐
Ability to work independently	☐	☐	☐	☐	☐	☐

Place a check beside the one of the following:

___ I strongly recommend this candidate
___ I recommend this candidate
___ I recommend this candidate with reservations
___ I do not recommend this candidate

Attach any comments to this form.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

School Name: _____ Telephone: _____

E-mail: _____

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OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By: _____

Application for Admission to Graduate Studies

Recommendation for Graduate Studies Form Reference 3

Full Legal Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE/MAIDEN)

Address: _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Telephone: _____ (Home) _____ (Work) _____ (Cell)

I am applying for admission to _____.

I agree that this recommendation will remain confidential, and **I ☐ waive / ☐ do not waive** my right to view it.

Signature: _____ Date: _____

The person named above is applying for admission to graduate studies at Kentucky State University. Please complete this form. You are welcome to attach a letter addressing any aspect of this person's experience or preparation that relates to the likelihood of the person's success in graduate studies. Please send this form and any additional comments to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

Rate the applicant from 1 to 5, where **1 =** superior, highly qualified for graduate studies; and **5 =** needs improvement in order to advance to the next level	1	2	3	4	5	No Basis
Intellectual ability	☐	☐	☐	☐	☐	☐
Writing ability	☐	☐	☐	☐	☐	☐
Speaking ability	☐	☐	☐	☐	☐	☐
Quantitative ability	☐	☐	☐	☐	☐	☐
Interpersonal skills	☐	☐	☐	☐	☐	☐
Ability to work independently	☐	☐	☐	☐	☐	☐

Place a check beside the one of the following:

___ I strongly recommend this candidate
___ I recommend this candidate
___ I recommend this candidate with reservations
___ I do not recommend this candidate

Attach any comments to this form.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

School Name: _____ Telephone: _____

E-mail: _____

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Application for Admission to Graduate Studies
Supervisor's Recommendation for Graduate Studies Form

OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By:_____

Full Legal Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE/MAIDEN)

Address: _____ (Number and Street) _____ (City) _____ (County) _____ (State/Province) _____ (Zip Code//Country)

Telephone: _____ (Home) _____ (Work) _____ (Cell)

I am applying for admission to _____.

I agree that this recommendation will remain confidential, and **I ☐ waive / ☐ do not waive** my right to view it.

Signature: _____ Date: _____

The person named above is applying for admission to graduate studies at Kentucky State University. Please verify the full-time professional position occupied by this applicant with an evaluation of knowledge, job skills, leadership ability, and your recommendation for pursuing advanced studies at Kentucky State University. You are welcome to attach a letter addressing any aspect of this person's experience or preparation that relates to the likelihood of the person's success in graduate studies. Please send this form and any additional comments to:

Office of Graduate Studies
Kentucky State University
Frankfort, Kentucky 40601–USA

Attach any additional comments to this form.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Employer Name: _____ Telephone: _____

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Application for Admission to Graduate Studies
Applicant Checklist

OFFICE USE ONLY: Form Rev 3-14-2005

Date Processed: _____ By:_____

Use this checklist to keep track of your application.

Reset The Entire Application

Items you submit to KSU:

Main Application Page and Supplement Page: ☐ Completed ☐ Submitted

Essay / Statement of Goals and Career Objectives: ☐ Completed ☐ Submitted

Resume (If required by program): ☐ Completed ☐ Submitted

Application Fee: ☐ Submitted

✱ *For International student applicants:*

International Application Fee: ☐ Submitted

International Applicant Supplement Page: ☐ Completed ☐ Submitted

Deposit for International students: ☐ Submitted

Verification of financial support form: ☐ Completed

Items you ask others to submit to KSU:

Transcript Request form(s) ☐ Completed ☐ Submitted

Graduate letter and reference form requested ☐ Completed ☐ Submitted

First reference: ☐ Request Sent to Referee; ☐ Follow-Up; ☐ Sent by Referee to KSU

Second reference: ☐ Request Sent to Referee; ☐ Follow-Up; ☐ Sent by Referee to KSU

Third reference: ☐ Request Sent to Referee; ☐ Follow-Up; ☐ Sent by Referee to KSU

Supervisor Recommendation: ☐ Request Sent to Supervisor; ☐ Sent by Supervisor to KSU

Tests: GRE (If required): ☐ Completed
GMAT (If required): ☐ Completed

✱ *For International student applicants:*

International Transcript Evaluation Service: ☐ Submitted
Tests: TOEFL (If required): ☐ Completed

Good Luck!

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