

GRADUATE SCHOOL

HSU BOX 7802 ARKADELPHIA, AR 71999-0001

E-mail: grad@hsu.edu Phone: (870) 230-5126 Web: www.hsu.edu
eet minimum academic requirements for admission as specified in the current Graduate Catalog.

| Δ | pplicants must meet imminum academic requirements for admission as specified in the current Graduate Catalog. | | | | | | |
|-----|--|--|--|--|--|--|--|
| | Official transcript(s) of undergraduate and graduate work, showing degree(s) and dates of attendance ar graduation, must be sent electronically or by mail to the HSU Graduate School from the institution. Transcrip must be on file before any applicant may be admitted to the Graduate School. | | | | | | |
| | | | | | | | |
| | New HSU graduate students must submit a \$25.00 application fee in order for their application to be processed. | | | | | | |
| 1. | LEGAL NAME: | | | | | | |
| | LEGAL NAME: LAST FIRST MIDDLE | | | | | | |
| 2. | MAIDEN NAME: | | | | | | |
| 3. | SOCIAL SECURITY NUMBER: | | | | | | |
| 4. | SEMESTER AND YEAR APPLYING FOR: Spring Sum I Sum II Fall YEAR | | | | | | |
| 5. | GENDER: Male 6. BIRTHDATE: | | | | | | |
| 7. | ARE YOU A U.S. CITIZEN? YES NO | | | | | | |
| | If you are not a U.S. citizen, provide your Alien Number A | | | | | | |
| | If you are not a U.S. citizen, are you lawfully present in the U.S.? YES NO | | | | | | |
| 8. | ETHNICITY — Are you Hispanic or Latino? YES NO | | | | | | |
| 9. | RACE — Which best describes you?1. American Indian or Alaska Native2. Asian | | | | | | |
| | 3. Black or African American 4. Native Hawaiian 5. White | | | | | | |
| 10. | MARITAL STATUS: 11. MILITARY VET? | | | | | | |
| 11. | Have you ever been convicted of a FELONY? YES NO If YES, what? | | | | | | |
| 12. | UNDERGRADUATE MAJOR: | | | | | | |
| 13. | ARE YOU LICENSED TO TEACH IN PUBLIC SCHOOLS? | | | | | | |
| | IF YES, DATE OF EXPIRATION: STATE: | | | | | | |
| 14. | TYPE OF TEACHING LICENSE (ELEMENTARY, SECONDARY, K-12): | | | | | | |
| | Do you intend to pursue a graduate degree at Henderson? If so, answer the following questions. If not, skip to item 17. | | | | | | |
| 15. | INTENDED GRADUATE SCHOOL MAJOR: | | | | | | |
| | INTENDED GRADUATE SCHOOL DEGREE OR LICENSURE: | | | | | | |
| | IF SEEKING LICENSURE, PLEASE SPECIFY: | | | | | | |

| 18. | HAVE YOU PREVIOUSLY APPLIED TO ENTER HENDERSON AS EITHER AN UNDERGRADUATE OR GRADUATE STUDENT? IF YES, DID YOU ATTEND? | | | | | | | |
|-----|--|---------------|--------------|-------------------|--------------|---------|-------------------------|--|
| 19. | . HSU I.D. NUMBER: | | | | | | | |
| 20. | LIST ALL COLLEGES AND UNIVERSITIES ATTENDED: | | | | | | | |
| | NAME OF SCHOOL | CITY | STATE | DATES ATTENDED | YE. GRADU | | CREDIT HRS OR DEGREE | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 21. | 21. PERSON TO NOTIFY IN CASE OF EMERGENCY: | | | | | | | |
| | LAST FIRST | | | MIDDLE | | | | |
| 22. | ADDRESS FO | OR LINE 21: | | | | | | |
| | | | | CITY | | ZIP | COUNTY | |
| | PHONE FOR LINE 21: () — | | | | | | | |
| 23. | YOUR CURR | LENT ADDRESS: | | CITY | | | COUNTY | |
| 24. | HOW LONG | HAVE YOU LIVI | | | | | | |
| | . HOW LONG HAVE YOU LIVED CONTINUOUSLY IN ARKANSAS THIS STAY? . HOME PHONE NUMBER: MOBILE PHONE NUMBER: | | | | | | | |
| 26. | . E-MAIL ADDRESS: | | | | | | | |
| | 7. WORK SITE: | | | | | | | |
| 28. | 28. WORK PHONE NUMBER: | | | | | | | |
| 29. | 29. WORK ADDRESS: | | | | | | | |
| 30. | 0. FAX NUMBER: | | | | | | | |
| 31. | UPON ENTE | RING HENDERSO | ON, YOU PLAN | ГО: | | | | |
| | LIVE IN UNIVERSITY HOUSING | | | | | | | |
| | LIVE OFF-CAMPUS | | | | | | | |
| 32. | 32. DO YOU PLAN TO APPLY FOR FINANCIAL AID? | | | | | | | |
| | 33. DO YOU PLAN TO APPLY FOR A GRADUATE ASSISTANTSHIP? | | | | | | | |
| 34. | 34. APPLICATION FEE \$25.00 (make check payable to the HSU Graduate School): | | | | | | | |
| 35. | 35. SIGNATURE: | | | | | | | |
| | T 1: . 1 . | | 1 1 1 | 1 . 1 11 .1 . | 6 | .1 . 1. | 1.1 | |

Indicate by signing above that you have read and understand all the information on this application and the information you have provided is factually correct and honestly prepared.

I understand and agree that during my tenure as a student at Henderson State University, I am responsible for paying when due all charges associated with enrollment and attendance at Henderson.

The campus coordinator for the Americans with Disabilities Act and Sec. 504 of the Rehabilitation Act is the General Council to the President, HSU Box 7744.

It is the policy of Henderson State University not to discriminate on the basis of race, color, national or ethnic origin, sex, marital or veteran status, age or disability. Henderson works continually to assure compliance with applicable Federal laws, including among others, the Civil Rights Acts; the Education Amendments; the Rehabilitation Act; the Americans With Disabilities Act; the Family Education Rights and Privacy Act; the Student Right to Know Act; the Campus Security Act; and the Drug-Free Schools and Communities Act.

STATE OF ARKANSAS STATEMENT OF SELECTIVE SERVICE STATUS IN COMPLIANCE WITH ACT 228 OF THE 1997 ACTS OF THE ARKANSAS GENERAL ASSEMBLY

I UNDERSTAND THAT TO BE ELIGIBLE FOR ADMISSION TO HENDERSON STATE UNIVERSITY, I MUST REGISTER, OR BE EXEMPT FROM REGISTRATION, WITH THE SELECTIVE SERVICE SYSTEM IN ACCORDANCE WITH THE MILITARY SELECTIVE SERVICE ACT, 50 U.S.C. APPX 451 ET SEQ., AS SPECIFIED IN ACT 228 OF THE 1997 ACTS OF THE ARKANSAS GENERAL ASSEMBLY. I THEREFORE SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT I HAVE REGISTERED WITH THE SELECTIVE SERVICE SYSTEM, OR I AM EXEMPTED FROM SUCH REGISTRATION BECAUSE OF THE FOLLOWING PROVISION(S) OF THE MILITARY SELECTIVE SERVICE ACT OR ACT 228 OF THE 1997 ACTS OF THE ARKANSAS GENERAL ASSEMBLY.

| Accented Ves | | Date: | | | |
|--------------|---------------------|---|--|--|--|
| | | | | | |
| SOCIAL SEC | CURITY NUMBER | SIGNATURE | | | |
| NAME (P | LEASE PRINT) | DATE | | | |
| | | | | | |
| | | ESIDENT NEIEN | | | |
| | I AM AN EXEMPTED F | | | | |
| | I AM 26 YEARS OF AG | | | | |
| | I AM UNDER 18 YEAR | OF AGE | | | |
| | | MBER OF THE ARMED FORCES ON ACTIVE DUTY | | | |
| | I AM A FEMALE | | | | |