



# HENDERSON STATE UNIVERSITY

Graduate School Application Deadline  
Fall June 30th  
Spring November 30th

EXCELLENCE • SPIRIT • TRADITION

**NOTE: All International transcripts must be accompanied by a General Evaluation report generated by Educational Credential Evaluators: [www.ece.org](http://www.ece.org).**

## Applicant Background

1. Legal Name \_\_\_\_\_  
Family (surname) Given Middle

2. Former Name (if any) \_\_\_\_\_

3. U.S. Social Security Number (or ID. assigned by HSU) \_\_\_\_\_

4. Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

5. Gender:  Female  Male

6. Is English your native language?  Yes  No

7. Have you achieved a TOEFL score of at least 550?  Yes  No

8. Has either of your parents graduated from HSU?  Mother  Father  Both

9. Current mailing address \_\_\_\_\_  
Number and Street (or P.O.Box)

\_\_\_\_\_ Town/City Province/State Postal Code Country

Telephone number \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

10. Permanent home Address: \_\_\_\_\_

Telephone number \_\_\_\_\_

11. In case of emergency contact (name) \_\_\_\_\_

(address) \_\_\_\_\_

(telephone number) \_\_\_\_\_

(relationship to you) \_\_\_\_\_

**Citizenship**

12. Country of Birth \_\_\_\_\_

13. Country of Permanent Residence \_\_\_\_\_

14. Country of Citizenship \_\_\_\_\_

15. Type of Visa being used or requested:     F-1     F-2     Other     None

**Admission Requested**         Undergraduate     Graduate

16. Year: \_\_\_\_\_                      Term:  January     May     August

17. Major field of study \_\_\_\_\_

18. Status:  New student (fewer than 12 credit hours)  
                   New transfer student (24 or more transferable credit hours)  
                   ESL student

19. Do you plan to obtain a degree from HSU?  Yes     No

**Release Information**

List persons in the U.S. to whom confidential information and/or documents may be released. Information will not be released to individuals not listed without your written permission.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**For Office Use Only**

Fee R Date \_\_\_\_\_    PL \_\_\_\_\_    STAT \_\_\_\_\_    STAN \_\_\_\_\_    TOEFL \_\_\_\_\_    IE \_\_\_\_\_  
Check # \_\_\_\_\_    OI \_\_\_\_\_    DCSN \_\_\_\_\_    RPLY \_\_\_\_\_    RESN \_\_\_\_\_    ELPT \_\_\_\_\_  
Fee W Date \_\_\_\_\_  
ID# \_\_\_\_\_    Advisor \_\_\_\_\_

**Required Test Reports**

(You must arrange for Educational Testing Services, Princeton, New Jersey, USA to send an official score report directly to Henderson State University. Photocopies will not be accepted as official.)

20.

Date Taken			<b>TOEFL</b>		
Year	Month	Score			

Date Taken			<b>GMAT</b>		
Year	Month	Score			

Date Taken			<b>Test of Spoken English</b>		
Year	Month	Score			

21. If you do not meet the HSU English proficiency requirement are you interested in attending our intensive English program before beginning academic coursework?  Yes  No

**Previous Education** List in chronological order schools (elementary, secondary, post-secondary) you have attended.

School	Location (City/Country)	Dates Attended	# Years Attended	Type of diploma, certificate, degree, etc.

22. Secondary School and graduation date \_\_\_\_\_

23. Have you ever applied to Henderson State University?  Yes, when \_\_\_\_\_  No

24. Did you enroll?  Yes, year \_\_\_\_\_ term \_\_\_\_\_  No

**Current Education**

25. Are you currently attending school?  Yes  No

26. Name and location of school \_\_\_\_\_

27. Date of first enrollment \_\_\_\_\_

Expected date of completion \_\_\_\_\_

28. Are you eligible to return next session?  Yes  No

If not explain \_\_\_\_\_

29. Are you presently attending (or planning to attend) college prior to enrollment here?  Yes  No

Name/term \_\_\_\_\_

List courses to be completed prior to enrollment here (not yet on transcript):


**Admission Information**

30. How did you learn about Henderson State University? \_\_\_\_\_

31. What influenced you to apply to Henderson State University? \_\_\_\_\_

I certify that all information given is complete and accurate. I further agree to inform the Graduate School of any change in my plans to attend Henderson State University. I understand that withholding information requested or giving false information may make me ineligible for admissions and enrollment or subject me to withdrawal from classes.

Date \_\_\_\_\_

Signed \_\_\_\_\_

Send completed application, fee, test scores, academic records, financial statement to:  
Henderson State University, Graduate School, Box 7802, Arkadelphia, AR 71999-0001  
Henderson State University is committed to the policy of providing educational opportunities to all qualified students  
regardless of their economic or social status, and will not discriminate on the basis of handicap, race, color, sex,  
creed, veteran's status, age, marital or parental status, or national origin.

Supplemental and Financial  
Information Form  
for International Students

Henderson State University  
Graduate School  
Box 7802  
Arkadelphia, AR 71999-0001  
Telephone: 870-230-5126  
Fax: 870-230-5479

**Part A: Personal Data**

1. Name \_\_\_\_\_
2. US Social Security Number (or I.D. assigned by HSU) \_\_\_\_\_
3. Date of Birth \_\_\_\_\_
4. Age \_\_\_\_\_
5. Gender  Female  Male
6. Address \_\_\_\_\_  
Number and Street
- \_\_\_\_\_
- | Town/City | Province/State | Country | Postal Code |
|-----------|----------------|---------|-------------|
|-----------|----------------|---------|-------------|
7. Current telephone number \_\_\_\_\_
- Fax number \_\_\_\_\_
- Email \_\_\_\_\_
8. City and Country of Birth \_\_\_\_\_
9. Country of Citizenship \_\_\_\_\_
10. Intended major field of study at the University: Degree sought:  Bachelors  Masters  ESL
11. Type of Immigration form desired:  I-20 for F-1 Student Visa  IAP-66 for J-1 Exchange Visa  None
12. If you are currently in the U.S., indicate your Immigration Admission Number: \_\_\_\_\_  
Attach copy of most recent I-20 or IAP-66 for entry into the U.S. \_\_\_\_\_
13. Person(s) in the U.S. to whom confidential information and/or documents may be released (information will not be released to persons not listed without your written permission): \_\_\_\_\_  
\_\_\_\_\_
14. Are you presently enrolled in another school or university?  Yes  No  
If yes, when will you leave? \_\_\_\_\_
- Will you be receiving a degree?  Yes  No
15. If you have been in correspondence with anyone at HSU (other than the Admissions Office), please list such persons and/or offices: \_\_\_\_\_

**In addition, a non-refundable application fee of U.S. \$75.00, in the form of a check or international money order should be sent by mail to:**

**Henderson State University, Graduate School  
Box 7802, Arkadelphia, AR 71999-0001**

## Part B: Required Test Reports

Note: You must arrange for ETS to send an official score report directly to Henderson State University (Institutional code: 6272). Photocopies will not be accepted.

16. Have you registered to take the TOEFL?  Yes  No

TOEFL test date & score \_\_\_\_\_

If you do not meet the TOEFL requirement (550 paper test; 213 computer based test), are you interested in completing our English as a Second Language (ELS) program before beginning academic coursework?

Yes  No

17. The Graduate Management Admissions Test (GMAT) is required for all graduate business administration applicants applying for an MBA.

GMAT Test Date and Score \_\_\_\_\_

## Part C: Financial Information

18. Does your country have restrictions that limit the amount of money that may be released to you each year in U.S. dollars?  Yes

No If yes, please specify the amount allowed and for what period of time? \_\_\_\_\_

19. What is the current rate of exchange for U.S. dollars in your country? \$(U.S.) = \_\_\_\_\_

20. Will you be applying for financial aid from Henderson State University?  Yes  No

(Note: Financial aid is not available for undergraduate students. Many departments do offer graduate assistantships, but these generally are not available for first-year students. Applicants with exceptional academic credentials and excellent English proficiency who wish to apply for an assistantship must contact the appropriate academic department chairperson for further information.)

21. Present occupation including title and employer: \_\_\_\_\_

22. Do you have any dependents who will come with you to the U.S.?  Yes  No

If yes, list the name, relationship, date of birth, and birthplace of each. You must show sufficient funds to cover your dependents' expenses while in the U.S. - approximately \$4,600 for a non-student spouse and \$2,800 for each additional dependent per year.

23. Indicate in U.S. dollars the amount of money (not less than \$16,000.00 per year) that will be available to you annually from the sources specified below, and provide the appropriate supporting documents. You must show a course of full financial support for all years of attendance. Funds for the support of dependents accompanying you to the U.S. must also be included. A certificate of Eligibility (Form I-20 or IAP-66) may be issued only when you show satisfactory financial arrangements for meeting the expenses of your entire program of study.

How long to you plan to study at HSU? \_\_\_\_\_

### Source of Funds

Source of Funds				
Self-Support \$ _____ Personal Savings: Attach bank statement or have bank official sign below.	Family/Sponsor \$ _____ Parents and/or Supporters: Have parent/ sponsor sign below or attach letter of support and bank statement or have bank official sign below.	Scholarship/Fellowship \$ _____ Agency: _____  Attach a letter from sponsoring agency giving the details of your award.	Other \$ _____ Source: _____  Attach a letter from the person or organization giving the details of their support.	Total \$ _____ Source: _____  Total must equal or exceed HSU's estimated academic year costs for each calendar year you plan to attend.

## Official Certification of Sources of Funds and Amounts

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available. This does not constitute a guarantee on the part of the bank.

Signature of Bank Official \_\_\_\_\_  
Place stamp of bank over signature

Name and Address of Bank \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

Name of Sponsor \_\_\_\_\_

Signature of Sponsor \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Relationship to Student \_\_\_\_\_

Date \_\_\_\_\_

By signing my name to this form, I certify that the information I have given is a correct statement of my arrangements for financing my studies at Henderson State University.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Office Use Only

Accepted \_\_\_\_\_ Yes \_\_\_\_\_ No      Initials \_\_\_\_\_      Date \_\_\_\_\_