



GRADUATE STUDIES ADMISSION APPLICATION
McMURRY UNIVERSITY

Please complete and return this form to the following address. A \$35.00 non-refundable fee is required with each graduate application. (Checks payable to McMurry University or pay online at https://mcm.afford.com/PPT/MakeAPayment)

Graduate Studies Admission
Office of the Registrar
1 McMurry University #338
Abilene, TX 79697

Phone: 325.793.3888
Fax: 325.793.3830
email: gradstudies@mcm.edu

BIOGRAPHICAL INFORMATION

Full Legal Name: Last First Middle Suffix

Maiden and Other Names:

Social Security Number: Date of Birth: Gender: M F
(providing SSN is optional but will be required for federal financial aid and/or some specific graduate programs)

Current Physical Address: Permanent Address:

Primary Phone: Alternate Phone:

Current Address Good Until: Email:

Military Status: VA TA Self Pay

EDUCATIONAL INFORMATION

Degree/Major you are Seeking:

- Master of Accountancy (M.ACC.)
Master of Science in Nursing (M.S.N.)
M.S.N. Track: Family Nurse Practitioner Education

Semester and Year for which you are applying: FALL SPRING

List ALL colleges, universities, and professional schools you have attended. Use the back if necessary.

Note: Prior to an evaluation for admission, applicants must provide a minimum of an unofficial transcript from each school previously attended. If admitted, a final official transcript from each previously attended institution is required. Each transcript should be mailed directly from the institution to the address at the top of this application.

Table with 4 columns: College, University, School; Dates of Attendance; Degree & Date Earned/Expected; Major

Have you ever been dismissed/placed on suspension for disciplinary reasons? No Yes (attach explanation)

Have you ever been found guilty of criminal offenses other than minor traffic violations? No Yes (attach explanation)

GRE/GMAT is not required unless requested by major department.

Self reported exam scores are unofficial. For any necessary exams student must submit official score report.

Church Preference: (optional)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Assembly of God | <input type="checkbox"/> Disciples of Christ | <input type="checkbox"/> Methodist | <input type="checkbox"/> No Preference |
| <input type="checkbox"/> Baptist | <input type="checkbox"/> Episcopal | <input type="checkbox"/> Mormon (LDS) | <input type="checkbox"/> Other Protestant |
| <input type="checkbox"/> Church of Christ | <input type="checkbox"/> Jewish | <input type="checkbox"/> Presbyterian | <input type="checkbox"/> Other |
| <input type="checkbox"/> Christian Scientist | <input type="checkbox"/> Lutheran | <input type="checkbox"/> Roman Catholic | <input type="checkbox"/> Prefer not to respond |

ETHNICITY: (if your admission is approved, this information is required by the U.S. Dept. of Education)

_____ **YES** _____ **NO** Are you of Hispanic, Latino, or Spanish origin?

(Defined as a person of Cuban, Mexican, Puerto Rican, South or Central American or any other Spanish culture or origin, regardless of race.)

RACE: (Regardless of your Ethnicity response, please indicate **ALL** of the following race(s) that apply)

_____ **American Indian/Alaskan Native**

(Defined as a person with origins in any of the original peoples of North, Central, or South America, who maintains a tribal affiliation.)

_____ **Asian**

(Defined as a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, such as Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippines, Thailand, & Vietnam.)

_____ **Black/African American**

(Defined as a person having origins in any of the Black racial groups of Africa and the Caribbean.)

_____ **Native Hawaiian/Pacific Islander**

(Defined as a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.)

_____ **White**

(Defined as a person having origins in any of the original peoples of Europe, Middle East, or North Africa.)

CITIZENSHIP: (Mark **ONLY ONE** category of the following that applies)

_____ U.S. Citizen

_____ U.S. Permanent Resident visa; citizen of _____

_____ International/Nonresident; citizen of _____

I certify that the information provided on this application is complete and correct to the best of my knowledge and that I have not attended educational institutions other than those listed. I understand that I am responsible for the forwarding of official transcripts from schools I have attended and of official exam scores (if required), and that such transcripts and score reports become the property of McMurry University and will not be returned to me.

I agree to abide by the rules and regulations of McMurry University as stated in the University Catalog and in the Council Fire student handbook. I understand further that admission granted on the basis of incorrect information or on omission of fact is invalid and subjects me to the forfeiture of monies paid and credits received at McMurry University.

Signature of Applicant: _____ Date: _____

McMurry University welcomes graduate applications for all qualified students regardless of gender, race, color, national origin, religion, handicap, or age.

For Office Use Only:

Cultivating Leadership, Excellence, and Virtue . . . Every Student, Every Day!!!