

## Office of Admissions

Box 91740  
Lake Charles, LA 70609  
(337) 475-5282 or  
1-800-622-3352 ext. 5282

**APPLICATION FEE:**  
U.S. Citizen \$20, International \$30  
(no cash accepted by mail)  
**Note: Submitting an incomplete or unsigned application will delay the processing of your admission.**

## APPLICATION FOR GRADUATE SCHOOL ADMISSION

To be eligible for admission to the Graduate School, the applicant must hold a bachelor's degree from a regionally accredited college or university and must satisfy both general and departmental admission requirements. Please refer to the MSU Catalog for detailed information about graduate admission.

DOCUMENTS SUBMITTED TO MEET ADMISSIONS AND RESIDENCY REQUIREMENTS BECOME THE PROPERTY OF MSU AND MAY NOT BE RETURNED.

Type or print in ink and complete all items.

### Enrollment

WHEN DO YOU PLAN TO ENROLL AT McNEESE?  FALL \_\_\_\_ (YR)  SPRING \_\_\_\_ (YR)  SUMMER \_\_\_\_ (YR)

This application and fee are valid for one calendar year. If you do not attend during the term you have indicated on this application, you must submit a semester change form to update your application.

### Personal Data

NAME (Give full legal name. Do not use initials unless initials are your legal name.)

Former last names used on transcripts

Last	First	Middle					
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)	BIRTHPLACE (City/State or Foreign Country)				
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>							GENDER
			<input type="checkbox"/> Male <input type="checkbox"/> Female				

ETHNICITY (Check One) This information is voluntary and will be used in a non-discriminatory manner consistent with applicable civil rights law.

American Indian or Alaskan Native  Asian or Pacific Islander  Black  Hispanic  White  Foreign Student  Other (list)

#### MAILING ADDRESS

No. & Street City Parish State Zip Code

HOW LONG HAVE YOU LIVED AT YOUR PRESENT ADDRESS? HOME PHONE ( ) E-MAIL ADDRESS  
Years Months WORK or CELL PHONE ( )

PRIOR ADDRESS HOW LONG?  
No. & Street City State Zip Code Years Months

ARE YOU A U.S. CITIZEN? IF NO, ARE YOU A RESIDENT ALIEN? IF NO, COUNTRY OF CITIZENSHIP VISA TYPE  
 Yes  No  Yes  No Alien#: ( )

IN CASE OF EMERGENCY, LIST NAME OF NEXT-OF-KIN (Mother, Father, Guardian, Spouse, Brother, Sister, etc.) Home Phone  
Name Address Relationship to you ( )

### Educational Data

DID YOU GRADUATE FROM A STATE-APPROVED HIGH SCHOOL?  Yes  No -OR- DID YOU RECEIVE A GED?  Yes  No DATE GED AWARDED

HIGH SCHOOL City Parish/County State

Dates Attended: From(MO/YR) To (MO/YR) High School Graduation Date:

HAVE YOU EVER ENROLLED AT McNEESE?  Yes  No Dates Attended: From (MO/YR) To (MO/YR)

LIST NAME AND LOCATION (CITY AND STATE) OF ALL COLLEGES ATTENDED INCLUDING McNEESE, LISTING MOST RECENT FIRST. ATTACH SEPARATE SHEET, IF NECESSARY	ENTERED (MO/YR)	DEPARTED (MO/YR)	DEGREE EARNED	MAJOR

CURRENTLY ENROLLED?  Yes  No Where? When does this session end? (MO/YR)

GRADUATE ENTRANCE EXAMINATION (check one)  Not yet taken  GMAT  GRE Test Date (MO/YR)

**DEGREE SEEKING STUDENTS, PLEASE INDICATE BELOW THE DEGREE, MAJOR, AND CONCENTRATION YOU PLAN TO PURSUE (SEE REVERSE SIDE):**

Degree Major Concentration Area

**NON-DEGREE SEEKING STUDENTS, PLEASE INDICATE BELOW THE DEPARTMENT THROUGH WHICH YOU WANT TO BE ADVISED.**

## Residency Information for Tuition Purposes

State supported colleges are required to collect documentary evidence of a student's Louisiana residency immediately prior to enrollment. The Admissions/Registrar's Office reserves the right to determine the validity of the documents submitted and to request additional information in order to comply with state residency

### Part I: Claim for residency based on self

How long have you lived in Louisiana? \_\_\_\_\_ Previous state or country of residence \_\_\_\_\_

Year(s) \_\_\_\_\_ Month(s) \_\_\_\_\_

If you came here within the past 2 years, why did you move to Louisiana? If other, please explain \_\_\_\_\_

Education  Employment  Job transfer  Other

Have you been employed in Louisiana in the past 12 months?  Yes  No

Employer's Name \_\_\_\_\_

Employer's Address \_\_\_\_\_

Employer's Phone \_\_\_\_\_

Dates of Employment \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

### Part II: Claim for residency based on parent, spouse, or legal guardian

Name of person upon whom claim is based \_\_\_\_\_

Parent

Spouse

Legal Guardian

Last \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Is person a U.S. Citizen? \_\_\_\_\_

Yes  No

How long has person lived in Louisiana? \_\_\_\_\_

Year(s) \_\_\_\_\_ Month(s) \_\_\_\_\_

If moved here within the past 2 years, why did this individual move to Louisiana? If other, please explain. \_\_\_\_\_

Education  Employment  Job transfer  Other

If either of your parents (mother or father only) is a graduate of McNeese, please note below: \_\_\_\_\_

Parent's complete name while attending MSU \_\_\_\_\_

Parent's graduation date \_\_\_\_\_

### Part III: Claim for residency based on active military assignment to Louisiana of self, parent, spouse or legal guardian

Name of person on active duty \_\_\_\_\_

Self

Spouse

Parent/Legal Guardian

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Home of record (documents must be submitted) \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE. FOR UNIVERSITY USE ONLY.**

Resident \_\_\_\_\_

Non-Resident \_\_\_\_\_

State \_\_\_\_\_

Parish /County \_\_\_\_\_

Proof of Residency Rec'd:  Yes  No

## Certification of Selective Service Compliance (Males Ages 18-25 Only)

I hereby swear or affirm under penalty of perjury, in accordance with the requirements of the Military Selective Service Act and the requirements of state law R.S. 17:3151, the following:

I am registered with Selective Service in accordance with the Military Selective Service Act, and a copy of my draft card is attached

I am not required to register because I am:

on active duty in the armed forces of the U.S other than reserve or national guard; or

excused from registration for the following reason:

I am a veteran of the U.S. armed forces (attach copy of discharge papers), or

Other: \_\_\_\_\_

## Statement of Understanding

I understand that I must meet eligibility requirements of my degree program as outlined in the **McNeese Catalog**. Admission to the University does not constitute admission to a degree program. I understand that information submitted herein will be relied upon by university officials to determine my admission status and residency eligibility. I authorize the university to verify the information I have provided. I agree to notify the Office of Admissions of any changes in the information provided. I certify that the information on this application is complete and correct. I understand the submission of false information or the intentional omission of information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PROOF OF IMMUNIZATION

ALL NEW STUDENTS BORN ON OR AFTER JANUARY 1, 1956, ARE REQUIRED TO SUBMIT PROOF OF IMMUNIZATION FOR MEASLES-RUBELLA-MUMPS (LOUISIANA R.S. 17:170, SCHOOLS OF HIGHER LEARNING) PRIOR TO REGISTRATION.

Check the program (and applicable concentration) for which you are applying:

#### Non-Degree

- Regular (*Enroll exclusively in graduate courses, or in both graduate & undergraduate courses*)
- Special (*Enroll exclusively in undergraduate courses*)
- Kodály Certification
- Master's \*30
- Initial Teacher Certification (*Non-Master's*)  
Area: \_\_\_\_\_
- Add-On Certification (*For persons already certified to teach*)

#### Master of Arts in Teaching (MAT)-Initial Certification

- Elementary Education - Grades 1-5
- Secondary Education - Grades 6-12
- Special Education Mild/Moderate - Grades 1-12

#### Education Specialist (EdS)

- Educational Leadership  
Concentration:  
 Educational Leadership  
 Educational Technology

#### Master of Arts (MA)

- English
- Psychology  
Concentration:  
 Addiction Treatment  
 Applied Behavior Analysis  
 Counseling Psychology  
 General/Experimental Psychology

#### Master of Business Administration (MBA)

- Business Administration  
Concentration:  
 Accounting

#### Master of Education (MEd)

- Curriculum & Instruction  
Concentration:  
 Early Childhood Education  
 Elementary Education  
 Secondary Education

- Educational Leadership
- Educational Technology Leadership
- School Counseling
- Special Education

Concentration:  
 Mild/Moderate

#### Master of Fine Arts (MFA)

- Creative Writing

#### Master of Music Education (MMEd)

- Music Education  
Concentration:  
 Instrumental  
 Kodály Studies  
 Vocal

#### Master of Engineering (MENG)

- Engineering  
Concentration:  
 Chemical  
 Civil  
 Electrical  
 Engineering Management  
 Mechanical

#### Master of Science (MS)

- Environmental & Chemical Sciences  
Concentration:  
 Agricultural Sciences  
 Chemistry  
 Chemistry Education  
 Environmental Science  
 Environmental Science Education

- Health & Human Performance

Concentration:  
 Exercise Physiology  
 Health Promotion  
 Nutrition & Wellness

- Instructional Technology

- Mathematical Sciences

Concentration:  
 Computer Science  
 Mathematics  
 Statistics

#### Master of Science in Nursing (MSN)

- Nursing  
Concentration:  
 Clinical Nurse Specialist  
 Nurse Educator  
 Nursing Leadership & Administration  
 Nurse Practitioner