

## Application for Graduate Admission

Please complete this application and make a payment for the non-refundable application processing fee of \$60. To facilitate the processing of your application, please submit all required documentation at your earliest convenience. **Please Note:** Not all the questions within this application apply to every program.

Please indicate the program to which you are applying. **Graduate Program** \_\_\_\_\_

Which term do you plan to enter? \_\_\_\_\_ Voice or Instrument Type (if applicable) \_\_\_\_\_

Live Streaming (if applicable) \_\_\_\_\_ Test Score (Self-Reported) GRE \_\_\_\_\_ GMAT \_\_\_\_\_

Do you have a current nursing license? (if applicable)  Yes  No State of Nursing License? (if applicable) \_\_\_\_\_

License Number? (if applicable) \_\_\_\_\_

If Nursing, have you ever had a professional license suspended, revoked, terminated, or made conditional?  Yes  No

### FULL NAME

Name (last, first, middle) \_\_\_\_\_

First Name Preference \_\_\_\_\_ Maiden Name \_\_\_\_\_

### CONTACT INFORMATION

Street Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Country of Citizenship \_\_\_\_\_

Home Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Office Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address \_\_\_\_\_

### PERSONAL INFORMATION

Social Security Number \_\_\_\_\_ (Your Social Security number is required for Internal Revenue Service reporting and financial aid.)

\*Date of Birth \_\_\_\_\_ \*Gender:  Male  Female

\*Church Affiliation \_\_\_\_\_

\*Marital Status:  Single  Married  Divorced  Widowed  Separated  Domestic Partner  Other

\*Active / Retired Military  Yes  No \*Are you a veteran?  Yes  No Branch \_\_\_\_\_

\*Are you eligible for military benefits?  Yes  No

\*Please indicate ethnic background: (Choose one)

Hispanic or Latino  Not Hispanic or Latino

\*Race (Please mark one or more)

Asian  Black or African American  Native Hawaiian or Other Pacific Islander  American Indian or Alaska Native  White

*\*This information is voluntary and will be used in a non-discriminatory manner, consistent with applicable civil rights laws.*

### ACADEMIC INFORMATION

Please list all colleges and universities attended. **List bachelor's degree-granting institution first.**

College or University	Degree Awarded	Year Awarded
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever attended OKCU?  No  Yes, Undergraduate  Yes, Graduate Year \_\_\_\_\_

## EMPLOYMENT

Are you presently employed?  Yes  No Employer \_\_\_\_\_

Title and/or nature of employment \_\_\_\_\_

Start of employment \_\_\_\_\_ Average hours per week \_\_\_\_\_

Does your employer provide tuition reimbursement?  Yes  No

## EMERGENCY CONTACT INFORMATION (REQUIRED)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

## ADDITIONAL REQUIRED INFORMATION

What influenced your decision to apply to OKCU? \_\_\_\_\_

Have you ever been charged or convicted for any felony in any state or country (unless expunged)?  Yes  No

Have you ever been charged or convicted for behavior involving violence in any state or country (unless expunged)?  Yes  No

Have you ever been charged or convicted for any behavior involving harm to others (e.g. stalking, domestic violence, assaults, etc.) in any state or country (unless expunged)?  
 Yes  No

Have you ever been suspended, dismissed or expelled from any college or university?  Yes  No

Have you ever been suspended, dismissed, or expelled from any college or university housing?  Yes  No

Are you facing current disciplinary charges at any college or university? Other (explain)  Yes  No

*If you answered "Yes" to ANY of the required questions above, upload a separate Word document describing the dates, nature of offense, and the circumstances of the parole or probation.*

An affirmative response to any of the questions above will be subject to a criminal background check and secondary admissions screening. Misrepresentation in answering these questions will be grounds for revocation of any offer of admission and/or may constitute misconduct under the Oklahoma City University Student Code of Conduct.

## ADMISSIONS POLICY AND FINAL ACKNOWLEDGMENT

Oklahoma City University seeks students with diverse backgrounds, interests and talents, and we encourage students with visible and/or invisible disabilities who meet our criteria to apply. While admissions is highly selective, no one criteria determines acceptance, as Oklahoma City University looks at the whole student including academics, test scores, and other involvement. Each applicant is considered in terms of the student's individual qualities and potential for successfully completing the requirements of the University.

If you are a student with a disability applying to Oklahoma City University, you may share information about your disability on your application for admission. You are not required to make a disclosure of a disability, but may choose to mention it in your admissions materials. For example, you may provide information about how your disability may have affected your academic profile or other challenges and how you overcame these obstacles. Oklahoma City University pledges to recruit, select, and promote diversity by providing equality of opportunity in higher education for all current and prospective students, faculty, and staff with respect to hiring, continuation, promotion and tenure, and applications for admission or employment, without discrimination or segregation based on sex (gender), race, age, ancestry, color, disability, genetic history, national origin, marital status, medical condition, religious creed, sexual orientation, gender identity/expression, pregnancy, parenting status, status as a veteran, or the perception that a person has one or more of these characteristics. By submitting this application, you are opting in to allow Oklahoma City University use to any pictures that include your identifiable image. Additionally, you are allowing Oklahoma City University the right to share and make public any image related to Oklahoma City University that is posted by you on any accounts related to social media. You will need to provide in writing if you would like to opt out.

The Chief Human Resources Officer, located in Room 105 of the Clara E. Jones Administration Building, telephone 405-208-5075, coordinates the University's compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act and amendments, and the Age Discrimination in Employment Act.

Oklahoma City University recognizes its responsibilities as an educational institution to promote a productive student environment. This responsibility demands implementation of programs and services which facilitate that effort. Federal law requires the establishment of drug and alcohol prevention programs and the University prohibits the use of illegal drugs and alcohol in or on University owned or operated facilities. In order to meet these responsibilities and federal requirements, the University has established The Alcohol and other Drug Use Policy, which is included in the OKCU Student Code of Conduct. I understand that Oklahoma City University has an Alcohol and other Drug Use Policy. I further understand that the Vice President for Student Affairs and Dean of Students is authorized to require those students who he/she has reasonable grounds to believe are improperly using or possessing controlled substances in violation of the University's Drug Use policy to participate in the drug screening program.

A student, who is convicted of a state or federal offense involving the possession or sale of an illegal drug that occurred while the student is enrolled in school and receiving Title IV aid, is not eligible for Title IV funds. A borrower's eligibility is based on the student's self-certification on the Free Application for Federal Student Aid (FAFSA). Convictions that are reversed, set aside or removed from the student's record, or a determination arising from a juvenile court proceeding do not affect eligibility and do not need to be reported by the student.

I hereby certify that I have read the above policy and acknowledgment and all the information provided in this application is true and accurate.

Signature \_\_\_\_\_ Date \_\_\_\_\_