## Byrdine F. Lewis College of Nursing and Health Professions Application for Graduate Study



## Please type and print completed application.

Social Security Number	(if available)		-	
Name				
Name Last (family name)		First	N	liddle
Former name(s) used at	previous colleges, if any _			
Email address	s this will be the primary mode of	f communication		
		communication.		
Present mailing address	Number/Street			
City		State	ZIP	Nation
If applicable, address go	ood until			
Present telephone numb	ers			
1 100000 1000 10000 100000	Home	Work (if available)		Cell
Permanent mailing addr (if different from above)	Number/Street			
City		State	ZIP	Nation
(if different from above)	a on gender and ethnic groups to	certain federal and state agencies, as ti	— he data relates to civil rigl	nts compliance. The provision of this
Gender:	Race/Ethnic Group:			
Birth date		Country	of Birth	
Month	Day Year			
Special Status-Applyi	ng for Non-Degree (Nurs	ing Program Only):		
Transient	Non-Deg	gree		
Semester/Year for which	ch youare applying: Year 2	0		
Fall (August				
Spring (January	)			
Summer (June)				

How did	you learn about this degree progr	am?					
List all C	olleges/Universities you have atte	ended: (List most recent fir	st)				
OAA Office Use Only	Name of College/University	Location	From: Mo/Yr	To: Mo/Yr	Degree Program Major or Concentration	_	Awarded e/Date
Date you	took or intend to take the approp	riate exam:	GRE	MAT	GMAT		
	requested or intend to request so						
•	1						_
Have you	 i previously applied to Georgia S	tate University? N	0	Vec. Whi	ch year and term?		
Trave you	i previously applied to deorgia 3	late Offiversity!IV		1 es. wiii	en year and term:		
Employn	nent History:						
OAA Office Use Only	Organization	City, State, Country	Occupat	ion Title	Full-time or Part-time	Years Emp	loyed
· · · · · · · · · · · · · · · · · · ·							
Other Inf	Formation:						
	a ever been convicted of a crime of	other than a minor traffic	violation? _		_		
If yes, explain in 100 words or less:							
Are you currently charged with or have been found guilty of any violation of a federal, state, or municipal law, regulation or ordinance							
other than minor traffic violations, including offenses for which any type of first offender status has been granted?  If yes, explain in 100 words or less:							
Have vor	ı ever entered a plea of guilty, no	contest nolo contandor	or Alford pla	a or have of	herwise accented respons	ihility for t	he
commiss	ion of a crime?		or Arrora pre	a, or nave ou	ner wise accepted respons	10111t y 101 t	.110
If yes, please explain in 100 words or less:							

Do you currently have disciplinary or aca college or university?	demic misconduct or academic mis	sconduct charges pending against you from another
If yes, please explain in 100 words or less	:	
Have you ever been disciplined, suspende	d, or expelled for conduct code vio	olations from a postsecondary educational institution?
If yes, please explain in 100 words or less	:	
Are you on academic probation, suspension	on, exclusion, or any other type of	academic warning at any previously attended institution?
If yes, please explain in 100 words or less	::	
Have you received any type of discharge If yes, please explain in 100 words or less		n honorable discharge?
Emergency Contact Information:		
Last (family name)	First	Relationship
Emergency Phone Number		
INTERNATIONAL APPLICAN	T INFORMATION	
Applicants whose native language is not I	English or who have not earned a d	legree from a U.S. institution.
Primary language:		
Language used in college instruction:		
Date you took or intend to take the Test o	f English as a Foreign Language (	TOEFL):
Date you requested or intend to request so	ores to be sent to GSU:	

Non-U.S. Citizens Only	(whether in this country	or applying from abroad):
------------------------	--------------------------	---------------------------

Type of Visa requested (Select one)

H-2	B-1	B-2	Refugee	Asylee
Other				
Other				
Is this visa currently held?	Yes	No		

J-1

If you are a Permanent Resident Alien, please provide your alien number and date the card was issued:

I understand that any material false statement made knowingly and willfully by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

Further, I certify that, to the best of my knowledge, the information submitted on this application is true and complete.

#### IMPORTANT: THIS FORM MUST BE SIGNED.

I certify that the information provided on this application and any attached documents is true and accurate to the best of my knowledge and understand that omissions or falsifications may result in withdrawal of a decision to accept me or in disciplinary action. I understand that I must request and provide official transcripts to the Byrdine F. Lewis College of Nursing and Health Professions from all appropriate colleges or universities attended (except GSU) before I may be considered for admission. I further understand that I may be required to furnish additional information or take additional tests to be considered for admission.

SIGNATURE OF APPLICANT	DATE	

Georgia State University, a unit of the University System of Georgia, is an equal opportunity educational institution and an equal opportunity/affirmative action employer. The University is open to people of all races and actively seeks to promote racial integration.

Residence Information for Fee-Paying If you are under the age of 24, has a parer Georgia for 12 consecutive months  Y	nt or U.S. court es □ No	t – appointed legal guar		tain residency in			
State of Residence	How long hav	ve you continuously resi	ided in Georgia? From	To			
Where do you pay property taxes?	Where do you pay property taxes? Where are you registered to vote?						
List your employment history for the prev	vious 12 month	s:					
Name of Employer	Dates of Employment Full or P			State			
	From	То					
	From	То					
If you filed a Georgia Individual Income	Tax Return as	a resident of Georgia, w	hat was last year filed?				
Signature of App	olicant		Date form was completed a	and signed			
Any omission or misrepresentation of facts or failure to readmission of any student.	o furnish the correct	t information the Office of Acad	lemic Assistance will automatically	invalidate the			
Please read the following carefully. If you ar	nswer yes to any	y of the questions below <b>j</b>	please attach a detailed stat	ement.			
<ul> <li>Are you ineligible to enroll at any prevalence.</li> <li>Are you currently on or have you ever academic warning at any previously attended in the Are you currently charged with, or have regulations of a previously attended instruction.</li> <li>Have you left a previous institution where you currently charged with, or have regulation or ordinance other than min have been granted? No Yes.</li> <li>Have you ever entered a plea of guilty responsibility for the commission of a second of the provious support of dischart.</li> <li>Have you received any type of dischart.</li> </ul>	been placed on a tended institution re been found gustitutions? No nile there were p re been found gus or traffic violation, no contest, noto crime? No	academic probation, suspending. No Yes wilty of, any violation of active yes bending charges of any violation of a const, including offenses for contendere, or any Alfor Yes.	cademic honesty, honor code lation of academic honest, ho federal, state, or municipal late which any type of first offer rd plea, or otherwise accepted	onor code, or  aw,  nder status			
I understand that any material false states attached hereto may, in accordance with knowingly commits the offense of false store for not less than one nor more than five y understand that any such false statement	O.C.G.A. 16-10- swearing shall be years, or both, su may subject me	-71, which provides that use punished by a fine of no object me to prosecution in to immediate dismissal from	upon conviction, a person what more than \$1,000 or by import a court of law. Additionally om the institution.	o orisonment y, I further			
Further, I certify that, to the best of my k  Signature of Appli		normation submitted on ti		Date			



# **Non-Degree Application Form (Nursing Only)**

Graduate nondegree status is available under some programs in the Byrdine F. Lewis College of Nursing and Health Professions. A student is admitted to this status at the option of the department/school concerned; some units do not offer courses for nondegree students. Under this category, a student is limited to 9 semester hours of graduate course work and must obtain permission to enroll in desired courses each semester. Admission to nondegree status does not warrant admission to any degree program.

NAME	Panther ID#
Term of Enrollment	
Please list the course(s) you intend to take.	
Course 1	
Course 2	
Course 3	
Course 4	

### LAWFUL PRESENCE REQUIREMENT

The Board of Regents of the University System of Georgia requires that any student applying to Georgia State University must provide verification of their lawful presence in the United States before their admission to the university can be finalized.

This requirement is detailed in the following Board of Regents policies:

<u>Policy 4.1.6 Admission of Persons Not Lawfully Present in the United States</u> <u>Policy 4.3.4 Verification of Lawful Presence</u>

While not required at the time of application, providing one of the following documents may expedite your verification process. Please submit a black and white copy of one of the items listed below with your application. Please note, only U.S. Citizens and Permanent Residents should submit documentation.

Please submit a copy of one of the following documents:

- Current U.S. Passport
- Current GA Driver's License issued by the State of Georgia after January 1, 2008
- Current GA ID Card issued by the State of Georgia after January 1, 2008
- U.S. Certificate of Naturalization
- U.S. Certificate of Citizenship
- U.S. Certificate of Birth Abroad
- Permanent Resident Card