

INTERNATIONAL APPLICATION FOR ADMISSION

All materials submitted in conjunction with an application become the property of Kansas State University and will not be returned. PLEASE TYPE OR PRINT CLEARLY.

The Graduate School

Kansas State University

Admission requested for: Fall (August) Spring (January) Summer (June) Year: _____
 Degree Requested: Master's EdD PhD Non-degree

PLEASE LIST YOUR NAME AS IT APPEARS ON YOUR PASSPORT.

1. _____
 Family/Last Name Given/First Name Middle Name Other names you may be listed under

2. Social Security Number _____ I choose to not use or do not have a social security number. Please assign a number.
(optional: Solicited per K.S.A. 76-725. Used as student identifier for records and accounts)

3. Graduate program in which you wish to study _____

4. Primary Language _____ Visa Type _____ Date of Birth _____
Month / Day / Year

5. City of Birth _____ Country of Birth _____

6. Country of Citizenship _____ Country of Permanent Legal Residence _____

7. Permanent International address	Mailing address for reply
Street _____	Street _____
Street _____	Street _____
City _____	City _____
State /Zip Code/Country _____	State /Zip Code/Country _____
Phone _____	Phone _____
Current e-mail address _____	Fax number _____

8. Person to contact in an emergency _____
Name Relationship
 Street _____ City _____ State/Zip Code _____ Country _____ Phone _____

9. Are you currently attending a University / College in the United States? _____ If yes, what is your SEVIS Number? _____

10. Are you currently on practical training? _____ If yes, what are your approved dates? _____

11. Give the names and addresses of all colleges and universities attended including Kansas State University and any currently attending. Do not list grammar or high schools. If sufficient space is not available, please list additional schools on a separate sheet of paper.

Institution	Location	Dates Attended (MO/YR)	Degree Received	Month/Year
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

12. List the names of three instructors who have been asked to submit letters regarding your qualifications for graduate study.
(Letters should be sent directly to the program.)
 I waive my right of access to letters of reference. Yes No (References should be informed if you are NOT waiving access to their letters.)

Name	Position	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Employment Record: List current and two previous positions.

Company or Institution	Nature of Position	Location	Inclusive Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14. Ethnic/Racial Status and Gender (required for federal and state accounting purposes only):

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Hispanic/Spanish American/Latin American	<input type="checkbox"/> White, Non-Hispanic	<input type="checkbox"/> Female <input type="checkbox"/> Male
<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Mexican/Mexican American	<input type="checkbox"/> Other	
<input type="checkbox"/> Black, Non-Hispanic	<input type="checkbox"/> Multiracial	<input type="checkbox"/> I prefer not to respond	

15. If English is not your primary language, a satisfactory TOEFL score is required. If you have already taken the TOEFL, what was the registration number _____ and test date? _____ Have scores been sent to Kansas State? Yes No

16. Please indicate if you have taken/will take any of the following standardized tests and the test date:
 GRE _____ GMAT _____ Miller's Analogy _____
 Have scores been sent to Kansas State? Yes No If not, please do so.

17. **Affirmation and signature.** By my signature below I affirm that I understand that submitting any false information to the University, including but not limited to, false transcripts, test scores or any information contained on this form, or withholding information about my previous academic history will make my application for admission to KSU, as well as any future applications, subject to denial, or may result in dismissal from the University.

Applicant's Signature _____ Date _____

FOR GRADUATE SCHOOL USE ONLY. DO NOT WRITE IN BOX BELOW.					
WID	Citizenship	DOE	Class	Adm Status	
ID	Sex M F	Curriculum	Subcurriculum		
Entered iSIS	Univ Info	Transc entered	GPA entered	Checklists	EPT Hold
Letter & I-20 sent			Dept sent letter & I-20		