Mail the following to The Graduate School, 1200 Murchison Road Fayetteville NC 28301-4252:

CREDENTIAL REQUIREMENTS

**Doctoral Degree Seeking** (please provide the following):

1. Official transcript(s) depicting baccalaureate degree and all other post-secondary studies
2. Contact ETS promptly and ask that your Graduate Record Examination (GRE) scores be reported to Fayetteville State University (institution #5212). **Scores must not be older than five (5) years at the time of application.**
3. Three (3) FSU Recommendation for The Graduate School Forms from persons qualified to evaluate the applicant’s abilities to pursue graduate work (i.e.; Professors or supervisors, not family and/or friends)
4. Documentation of a minimum of three (3) years of high performance in education or other related experiences
5. A portfolio which includes a vitae and work by the candidate in a project or program of significance with public schools should be mailed separately to: Ed. D. Program, Fayetteville State University, 1200 Murchison Road, Fayetteville, NC 28301-4252. Have Questions? Call (910) 672-1810.

**Master’s Degree Seeking** (please provide the following):

1. Official transcript(s) depicting baccalaureate degree and all other post-secondary studies
2. The College of Arts and Sciences requires official Graduate Record Examination (GRE) scores; the School of Education requires official GRE or Miller Analogies Test (MAT); and the School of Business and Economics requires official Graduate Management Admission Test (GMAT) or GRE scores. You should contact Educational Testing Services (ETS) for GRE scores, Graduate Management Admissions Council (GMAC) for GMAT scores, or PsychCorp for MAT scores and request that your scores be reported to Fayetteville State University (#5212). **Scores must not be older than five (5) years at the time of application.**
3. Two (2) FSU Recommendation for The Graduate School Forms from persons qualified to evaluate the applicant’s abilities to pursue graduate work (i.e.; Professors or supervisors, not family and/or friends). **NOTE THE FOLLOWING EXCEPTIONS:** Three (3) FSU Recommendation for The Graduate School Forms are required for applicants applying to School Administration, Social Work, and Sociology programs.
4. A copy of current teaching license (required only from applicants applying to Master of Education and MSA programs).
5. See department website for additional requirements (i.e.; interview, resume, or written statement).

**Seeking Professional Development** (please provide the following):

Official transcript depicting baccalaureate degree and all other post-secondary studies

**Seeking Certification** (please provide the following):

1. Official transcript(s) depicting baccalaureate degree and all other post-secondary studies
2. Two (2) FSU Recommendation for The Graduate School Forms from persons qualified to evaluate the applicant’s abilities to pursue graduate work (i.e.; Professors or supervisors, not family and/or friends). **NOTE THE FOLLOWING EXCEPTIONS:** Three (3) FSU Recommendation for The Graduate School Forms are required for applicants applying to Social Work and Sociology programs.
3. See department website for additional requirements (i.e.; interview, resume, or written statement).

**Seeking Initial Teacher Licensure** (please provide the following):

1. Official transcript(s) depicting baccalaureate degree and all other post-secondary studies
2. Two (2) FSU Recommendation for The Graduate School Forms from persons qualified to evaluate the applicant’s abilities to pursue graduate work (i.e.; Professors or supervisors, not family & friends)

**Seeking Renewal of Teacher Licensure** (provide the following):

Official transcript depicting baccalaureate degree and all other post-secondary studies

The non-refundable application fee ($40) is subject to change. Cash and debt/credit card payments are only accepted at the University cashier’s office; cashier’s receipt must be attached to the application. Personal check, cashier’s check, or money order should be made payable to Fayetteville State University Graduate School and can be remitted directly to The Graduate School.

One official copy of your transcript from each college or university attended is required for all post-secondary work, even if the coursework appears as transfer credit on another university transcript. Students submitting transcripts from international universities must submit certified (course-by-course evaluation with GPA) English translations of their transcripts from World Education Services (WES), Education Evaluators International, Inc (EEI), or International Education Evaluations (IEE).

**INSTRUCTIONS**

Please complete the application carefully, printing clearly. Failure to complete and/or direct materials per these instructions will result in delays in the processing of your application. The Graduate School is not responsible for materials improperly submitted.

Questions? Call (910) 672-1810.
Application for Admission to The Graduate School

Step 1: Biographical Information

Name: □ Mr. □ Ms. □ Dr. □ (Last) □ (First) □ (Middle Initial) □ (Maiden)

Mailing Address: □ (Street Address or P.O. Box) □ (City) □ (State) □ (Zip Code)

Residential Telephone: __________________________ Cellular Telephone: __________________________

E-Mail Address (es): ____________________________________________

Current Professional Position: __________________________ Telephone: __________________________

Sex/Gender: □ Male □ Female Date of Birth: __________________________

Place of Birth: □ (City) □ (State) □ (County)

Are you a resident of North Carolina? □ Yes □ No If yes __________________________

If yes, you must complete the attached NC Residency Form. __________________________ __________________________

Are you a U. S. Citizen? □ Yes □ No If not, please list visa type: __________________________ Date Issued __________________________

(Note: Please attach copy of Visa)

Are you a member of the Armed Services stationed in North Carolina? □ Yes □ No

If yes, which branch? □ Army □ Air Force □ Navy □ Marines □ Coast Guard

Are you the Dependent Relative of a member of the Armed Services stationed in North Carolina? □ Yes □ No

Are you a Veteran? □ Yes □ No If yes, will you be receiving VA educational entitlement? □ Yes □ No

Ethnic Information:

Are you Hispanic or Latino? □ Yes □ No

Select one or more that apply: □ American Indian or Alaskan Native □ Asian □ Black / African American

□ Native Hawaiian or Other Pacific Islander □ White / Caucasian

Please Note: Information related to applicant ethnicity and gender is collected for statistical purposes only and is not a factor in the admissions decision. The U.S. Department of Education requires institutions of higher education that receive federal assistance to report minority group student enrollments. This information will assist in meeting this requirement.

Step 2: Emergency Contact Information

Name: __________________________ Relationship: __________________________

Residential Telephone: __________________________ Cellular Telephone: __________________________

E-Mail Address (es): ____________________________________________

Mailing Address: □ (Street Address or P.O. Box) □ (City) □ (State) □ (Zip Code)

□ (County) □ (State) □ (Zip Code)
### Step 3: Application Information

#### Applying for Admission as: *(Please check only one)*

- [ ] Degree Seeking
- [ ] Professional Development
- [ ] Teacher Licensure
- [ ] Certification
- [ ] Re-admit

#### Applying for Admission to: *(Please check one)*

- [ ] Doctorate in Educational Leadership *(Admitted for the Fall Semester only)*
- [ ] Master of School Administration *(Admitted for the Fall Semester only)*
- [ ] Master of Business Administration

#### Master of Arts

- Sociology [ ]
- Psychology: *(Admitted for the Fall Semester only)*
  - Counseling [ ]
  - Experimental [ ]

#### Master of Arts in Teaching

- Middle Grades Education (6-9):
  - Language Arts [ ]
  - Mathematics [ ]
  - Science [ ]
- Special Education (K-12):
  - General Curriculum (K-12): [ ]
- Secondary Education:
  - Biology [ ]
  - Mathematics [ ]
  - Sociology [ ]

#### Master of Science

- Criminal Justice [ ]

#### Certificate Program

- Criminal Justice [ ]
- Health Care Management [ ]
- Military Behavioral Health [ ]
- Professional Writing [ ]
- Project Management [ ]
- Sociology [ ]
  - Data Analysis [ ]
  - General [ ]
  - Health, Aging, and Demography [ ]
  - Teaching [ ]
  - Substance Abuse Studies [ ]
  - Teaching of Writing [ ]

#### Master of Education

*(Please note: You must have at least a Class A Level License in a teaching field to be considered for admission into the Master of Education Degree Program.)*

- Elementary Education (K-6) [ ]
- Reading [ ]
- Middle Grades Education (6-9):
  - Language Arts [ ]
  - Mathematics [ ]
  - Science [ ]
- Special Education (K-12):
  - Specific Learning Disabilities [ ]
  - Mentally Disabled [ ]
  - Behaviorally-Emotionally Disabled [ ]
- Secondary Education:
  - Biology [ ]
  - Mathematics [ ]
  - Sociology [ ]

#### Master of Social Work *(Admitted for the Fall Semester only)*

- Regular two (2) year track. Concentration:
  - Children and Family Services Concentration [ ]
  - Mental Health and Substance Abuse Services [ ]
- Advanced Standing one (1) year track. Concentration:
  - Children and Family Services [ ]
  - Mental Health and Substance Abuse Services [ ]
- Part-time three (3) year track. Concentration:
  - Children and Family Services [ ]
  - Mental Health and Substance Abuse Services [ ]

**FSU-Army MSW Program ONLY**

- Full-time fourteen (14) month track. Concentration:
  - Mental Health and Substance Abuse Services [ ]
  - Submit complete application packet to your recruiter.

### Licensure – Proposed Area: *(For applicants applying to teacher education programs, initial teacher licensure and renewal teacher licensure only)*

#### Education (K-12):

- Art Education [ ]
- Health & Physical Education [ ]
- Music Education [ ]
- Reading Education [ ]
- Special Education (General Curriculum) [ ]

#### Elementary Education:

- Birth to Kindergarten [ ]
- Elementary Education [ ]

#### Middle Grades Education (6-9):

- Language Arts [ ]
- Mathematics [ ]
- Science [ ]
- Social Studies [ ]

#### Secondary Education (9-12):

- Biology [ ]
- English [ ]
- Mathematics [ ]
- Sociology [ ]
- English as Second Language [ ]

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Do you currently hold or have you held a North Carolina Teacher License?  [ ] Yes  [ ] No

If yes, please specify area(s) __________________________
Have you attended Fayetteville State University before?  □ Yes  □ No

When do you plan to begin study at FSU?  (Fill in date and check the appropriate box)

Fall 20___ □  Spring 20___ □  1st Summer Session 20___ □  2nd Summer Session 20___ □

Please list the following information for all undergraduate and graduate institutions you have attended:

<table>
<thead>
<tr>
<th>School and Address</th>
<th>Degree Awarded</th>
<th>Major</th>
<th>Month/Year</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

Do you wish to reside on campus?  □ Yes  □ No

Step 4: Campus Safety Questions

To maintain a safe learning community, we must ask the following questions of all applicants. We cannot accept your application unless you answer these questions and provide required documentation if applicable. Your “yes” answer to one or more of the following questions will not necessarily preclude your being admitted. However, your failure to provide complete, accurate, and truthful information will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.

For the purpose of the following six questions, “crime” or “criminal charge” refers to any crime other than a traffic-related misdemeanor or an infraction. You must, however, include alcohol or drug offenses whether or not they are traffic related.

1. Have you been convicted of a crime?  ___ Yes  ___ No
2. Have you entered a plea of guilty, a plea of no contest, a plea of nolo contendere, or an Alford plea, or have you received a deferred prosecution or prayer for judgment continued, to a criminal charge?  ___ Yes  ___ No
3. Have you otherwise accepted responsibility for the commission of a crime?  ___ Yes  ___ No
4. Do you have any criminal charges pending against you?  ___ Yes  ___ No
5. Have you ever been expelled, dismissed, suspended, placed on probation, or otherwise subject to any disciplinary sanction by any school, college, or university?  ___ Yes  ___ No
6. If you have ever served in the military, did you receive any type of discharge other than an honorable discharge?  ___ Yes  ___ No  
   □ Currently Serving  □ Never Served

If you answered “yes” to any of the six questions above, please explain the circumstance on the next page.

You must promptly notify the Admissions Office in writing of any criminal charge, any disposition of a criminal charge, or any school, college, or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you submit this addendum. Your failure to do so will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.

I understand my failure to provide complete, accurate, and truthful information on my original application or the addendum will be grounds to deny or withdraw my admission, or dismiss me after enrollment.

_________________________________________________                         _______________________________
Signature                                              Date

I hereby affirm that all information on this application is complete and accurate. I understand that withholding information or giving false information will result in denial of admissions or dismissal after admission.

_________________________________________________                       _______________________________
Signature                                              Date

"Fayetteville State University is a member institution of The University of North Carolina, which is committed to equality of educational opportunity and does not discriminate against applicants, students, or employees based on race, color, national origin, religion, sex, age, or disability.”
If you answered "yes" to any of the six questions on the previous page, please explain the circumstance(s) below.
Fayetteville State University
NORTH CAROLINA RESIDENCY FORM

All North Carolina residents must complete and return both sides of this form.

Information Relating to Claimed North Carolina Residence For Tuition Purposes—North Carolina Law (G.S. 116-143.1) requires that "To qualify for in-state tuition, a legal resident must have maintained his domicile in North Carolina for at least 12 months immediately prior to his classification as a resident for tuition purposes." The information requested on this form must be supplied by every applicant for admission or readmission to Fayetteville State University who claims to be eligible for the North Carolina tuition rate. Complete the form and return it with your application for admission. This information is to be used only in connection with determination of your residence status for tuition purposes.

Answer all questions. Type or print with black ink.

1. Applicant's Full Name ___________________________ Social Security Number (Optional for identification purposes only) ___________________________ - _____ - _____ - _____ - _____ - _____ - _____

2. When do you claim your legal residence in North Carolina began? ___________________________

3. Have you applied to be classified as a resident for tuition purposes at FSU during the last 12 months? □ Yes □ No
   If yes, decision reached: Resident Non-resident Last term and year you were so classified ___________________________
   Term    Year

4. Indicate the year and check the earliest term in which you want this residency decision to apply.
   Year _____ _____ □ Fall □ Spring □ Summer I □ Summer II

5. Age _______ Date of Birth _____ _____ _____ Place of Birth ____________________________
   Month          Day           Year            City    State

6. If citizenship other than U.S., indicate document status (visa, green card) ___________________________ When obtained ______

7. Current Mailing Address ___________________________ Since ______
   Street City State Zip Month Year

8. Previous Mailing Address ___________________________ Since ______
   Street City State Zip Month Year

9. Father living? □ No □ Yes His name _________________________________________________________________________

10. Mother living? □ No □ Yes Her name ____________________________________________________________________________

11. If your parents are divorced, in whose custody are/were you? (For dependent only) ___________________________

12. Name of court-appointed guardian ___________________________ Court appointed at ___________________________ on ______
   If Applicable Place Month Year

13. Have you or either of your parents been in active military service within the past 2 years? □ No □ Yes

14. If yes, what are the dates of military service? __/__/_____ to __/__/_____ If yes, location of permanent duty station __________________________

15. Check each of the following you have ever done outside North Carolina:
   □ Attended secondary school __/__/_____ to __/__/_____ □ Attended post secondary school __/__/_____ to __/__/_____ □ Worked __/__/_____ to __/__/_____
   (For questions 16-19: Please complete Father, Mother or Guardian information ONLY if you are claimed as a dependent by them.)

16. Permanent Address
   Your ______________________________________________________________________________________________________________
   Father ______________________________________________________________________________________________________________
   Mother ______________________________________________________________________________________________________________
   Guardian ______________________________________________________________________________________________________________

17. Last Address Outside North Carolina
   Your ______________________________________________________________________________________________________________
   __/__/_____ to __/__/_____ 
   Father ______________________________________________________________________________________________________________
   __/__/_____ to __/__/_____ 
   Mother ______________________________________________________________________________________________________________
   __/__/_____ to __/__/_____ 
   Guardian ______________________________________________________________________________________________________________
   __/__/_____ to __/__/_____ 
### 18. Occupation

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Address (City, State)</th>
<th>From / To Dates</th>
<th>Hours/Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your</td>
<td></td>
<td><strong>/</strong>/____ to <strong>/</strong>/____</td>
<td>________</td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td><strong>/</strong>/____ to <strong>/</strong>/____</td>
<td>________</td>
</tr>
<tr>
<td>Mother</td>
<td></td>
<td><strong>/</strong>/____ to <strong>/</strong>/____</td>
<td>________</td>
</tr>
<tr>
<td>Guardian</td>
<td></td>
<td><strong>/</strong>/____ to <strong>/</strong>/____</td>
<td>________</td>
</tr>
</tbody>
</table>

### 19. Who claimed you last year as a dependent on state and federal income tax returns?

<table>
<thead>
<tr>
<th>Name</th>
<th>Tax Year</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spouse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>You</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 20. Does anyone intend to claim you as a dependent on state and/or federal income tax returns for the current tax year?  □ Yes  □ No

If you answered YES: Name ______________________ Relationship to you ______________________

### 21. Indicate when and where each of the following was completed during the last two years. The parent or guardian section must be completed by the parent or guardian if you were claimed by them on the most recent tax return.

<table>
<thead>
<tr>
<th></th>
<th>SELF</th>
<th>PARENT/GUARDIAN (If applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Registered to Vote</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
<tr>
<td>2. Voted</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
<tr>
<td>3. Called to Serve on Jury Duty</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
<tr>
<td>4. Acquired or Renewed Driver's License</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
<tr>
<td>5. Acquired Ownership of Property for Use as Your Principal Dwelling</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
<tr>
<td>6. Registered Licensed Motor Vehicle(s)</td>
<td>Yes □ State: Date (M/D/Y)</td>
<td>Yes □ State: Date (M/D/Y)</td>
</tr>
<tr>
<td></td>
<td>No □</td>
<td>No □</td>
</tr>
</tbody>
</table>

*If additional information is needed, the applicant will be notified.*

I certify that these responses are true to the best of my knowledge, pursuant to reasonable inquiry where needed, and I am aware that my knowing falsification hereon may result in disciplinary action, including denial of admission or dismissal after admission.

Signature of Applicant ______________________ Date ______________________

Signature of Parent Or Guardian ______________________ Date ______________________

*(If Applicant is under 18 Years of Age)*