



# GRADUATE SCHOOL

Date: \_\_\_\_\_

## APPLICATION FOR GRADUATE ADMISSIONS

*Please type or print*

For the term beginning: October  March  Full-time  Part-time

Name: \_\_\_\_\_  
LAST FIRST MIDDLE FORMER NAME USED AT CLARK UNIVERSITY

U.S. Social Security #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
NUMBER AND STREET CITY/STATE/COUNTY/ZIP PHONE

Effective Dates: From \_\_\_\_\_ To \_\_\_\_\_

Billing Address: \_\_\_\_\_  
(if not same as above) NAME/FUNDING ORGANIZATION

NUMBER AND STREET CITY/STATE/COUNTY/ZIP/COUNTRY

E-Mail Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
NUMBER AND STREET CITY/STATE/COUNTY/ZIP PHONE

The following item is optional:

How would you describe yourself: (Please Check one)

- American Indian or Alaskan Native
- Asian or Pacific Islander  
(including Indian subcontinent)
- Black (non-Hispanic)
- Hispanic (including Puerto Rican)
- White, Anglo Caucasian American  
(non-Hispanic)
- Other (Specify)

Sex: \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Day-Month-Year

Place of Birth \_\_\_\_\_  
CITY COUNTRY

Citizenship: U.S. \_\_\_\_\_ Permanent Resident \_\_\_\_\_ Other \_\_\_\_\_

Country \_\_\_\_\_ Type of Visa \_\_\_\_\_

If U.S. citizen, please indicate home state \_\_\_\_\_

Program to which you are applying:

Application to \_\_\_\_\_ Specialization \_\_\_\_\_ Degree Sought \_\_\_\_\_  
DEPARTMENT (If none, please indicate)

Have you applied to this graduate school before? \_\_\_\_\_ Were you admitted? \_\_\_\_\_  
yes/no yes/no

Were you enrolled? \_\_\_\_\_  
Yes/no

Which Program? \_\_\_\_\_

Does your coming here to study depend on your receiving financial assistance from Clark University?  
If so, do you wish to be considered for the following?

Tuition Remission  Additional Stipend  Assistantship

List names of national graduate admission tests that you have taken or will take:

_____	Score _____	Date taken or scheduled _____
_____	Score _____	Date taken or scheduled _____
_____	Score _____	Date taken or scheduled _____

(Attach copies of graduate admission tests)

List any foreign languages you know and indicate your degree of proficiency for each:

Languages	Years Studied	Other	Reading			Writing			Speaking		
	College Level	Length-Type	good	fair	poor	good	fair	poor	good	fair	poor
_____											
_____											
_____											

### Education

Please list all colleges or universities which you have attended. Note that transcripts will be expected from all schools unless we are informed otherwise and the circumstances are explained.

School	Location	Dates attended	Degree earned	Date degree received
		MO./YR. – MO./YR.	(or expected)	(or expected mo./yr.)

UNDERGRADUATE DEGREE SCHOOL

\_\_\_\_\_

\_\_\_\_\_

College major \_\_\_\_\_ Graduate major \_\_\_\_\_

If you received fellowships, scholarships or other honors, please indicate:

List academic and professional organizations in which you have been active:

Ask three persons who know your academic qualifications well to write recommendations on your behalf, using the confidential recommendation forms attached. Please list:

Name	Position	Address/phone
_____		
_____		
_____		

**Employment and/or Record of experience**

Use the following grid to list periods of full-time, part-time, and summer employment periods of travel, unemployment, etc. If you feel any of these activities merit further explanation you may attach an additional sheet or your resume.

<b>Dates (MO./YR.) (most recent)</b>	<b>Employer/Activity</b>	<b>Address</b>	<b>Duties/Title</b>
<b>from:</b>  <b>to:</b>			
<b>from:</b>  <b>to:</b>			
<b>from:</b>  <b>to:</b>			
<b>from:</b>  <b>to:</b>			

**Activities**

List other activities since high school, including employment and military service, but omit summer and part-time work.

<b>Employer</b>	<b>Kind of work</b>	<b>Inclusive Dates</b>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

On a separate sheet please discuss your academic interests and goals. Include your current research interests as well as your long range research, teaching, or other professional objectives. List and describe published articles or books, research, inventions, or other creative work.

It is the student's responsibility to request that all official transcripts relating to the previous academic record be sent to the relevant academic department at Clark University.

We would welcome any additional comments you may wish to provide to the Committee in support of your application. Attach an extra sheet.

Please check off the following as you prepare to mail your application:

- Application (signed) with essay
- \_\_\_\_\_ Euro nonrefundable registration fee
- Transcripts. How many? \_\_\_\_\_

I certify that all information submitted by me as part of this application is complete and accurate.

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

Please return all materials and your nonrefundable registration fee of \_\_\_\_\_ Euro to the Department you are applying to, Clark University Branch Campus in Poland, 121/123 Gdańska St., 90-519 Łódź, POLAND

It is the policy of Clark University that each qualified individual, regardless of race, color, sex, sexual orientation, religion, national origin, age or handicap, shall have equal opportunity in education, employment, or services of Clark University. The University encourages minorities, women, Vietnam veterans, handicapped persons, and persons over 40 to apply.