

**SCHREINER UNIVERSITY
KERRVILLE**

Graduate Admission Application

PLEASE PRINT

Personal Data:

(Date) Month/Day/Year

Title: Mr. Mrs. Ms. Miss

SSN: _____ Legal Name: _____
Last/Surname/Family name First/Given name Middle Maiden

e-mail address: _____ Fax Number: _____

Other name(s) which might appear on previous academic records: 1) _____ 2) _____ 3) _____

Permanent mailing address: _____
Street & Number City County (if Texas)

Country (if outside the USA) State Zip Code

Current mailing address: _____
(If different from permanent.) Street & Number City County

Evening telephone (_____) _____ Day telephone (_____) _____ Cell Number (_____) _____

Address while attending Schreiner: Same as permanent Same as current If different, give address below:

Street & Number (or residence hall, room number and campus box number) City State Zip

Temporary address (if applicable): _____
Street & Number City State Zip

For period beginning: ____/____/____ Ending: ____/____/____

Emergency contact information:

Name Number & Street City State Zip
(_____) _____
Area Code/Telephone Number Relationship to Applicant

Have you ever attended Schreiner? No Yes If yes: Term _____ Year _____

Have any relatives attended Schreiner? No Yes If yes: Father Mother Other: _____

Did either of your parents receive a bachelor's or higher degree from any university? Yes No

DEGREE SEEKING APPLICANT Check appropriate box

Application is for starting semester:

- EDUCATION (Master of Education – MED) Fall Semester Spring Semester Summer Semester _____
Year
- EDUCATION (Master of Education – MED) Fall Semester Spring Semester Summer Semester _____
Plus Teacher Certification Year
- EDUCATION (Master of Education – MED) Fall Semester Spring Semester Summer Semester _____
Plus Principal Certification Year
- PRINCIPAL CERTIFICATION ONLY Summer Term _____
Year

PROGRAM DESIGN 1 Year Program

CITIZENSHIP

VETERAN STATUS

<p>Are you a U.S. citizen (native-born or naturalized)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, are you: <input type="checkbox"/> Permanent Resident Alien? <input type="checkbox"/> International?</p> <p>If international, complete the following: A. Place of Birth: _____ B. Date of Birth: _____ C. Country of Citizenship, if different from above: _____</p>	<p>A. Have you ever been a member of the United States Armed Services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>B. If yes, indicate dates of service: _____ _____</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you ever been suspended, dismissed, or forcibly withdrawn from an institution for nonacademic reasons? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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CURRENT EMPLOYMENT DATA (if applicable)

Place _____			
Address _____			
Street & Number	City	State	Zip
Telephone Number (_____) _____		Job Title _____	
Area Code/Number/Extension			

APPLICANTS FOR MASTER OF EDUCATION PLUS TEACHER CERTIFICATION

Have you worked as: A teacher's aide in a school district?	<input type="checkbox"/> Yes <input type="checkbox"/> No How long? _____
A Substitute Teacher?	<input type="checkbox"/> Yes <input type="checkbox"/> No How long? _____
<p>Schreiner University offers certification in the following levels and fields. Please check which certification you are pursuing. In which level and field do you wish to be certified?</p> <input type="checkbox"/> Early Childhood–Grade 6 Generalist <input type="checkbox"/> Grades 4-8 <input type="checkbox"/> English Language Arts & Reading <input type="checkbox"/> Mathematics <input type="checkbox"/> Mathematics/Science <input type="checkbox"/> Generalist	
<input type="checkbox"/> Grades 8-12 <input type="checkbox"/> English Language Arts <input type="checkbox"/> History <input type="checkbox"/> Mathematics <input type="checkbox"/> Life Sciences <input type="checkbox"/> Chemistry	
<input type="checkbox"/> All-Level <input type="checkbox"/> Exercise Science <input type="checkbox"/> Music <input type="checkbox"/> Grades 6-12 <input type="checkbox"/> Business Education	
<p>Applicants to the Master of Education <i>plus</i> Teacher Certification are required to complete 1 year of teaching as the Teacher of Record under a Probationary Teaching Certificate or 12 weeks of student teaching.</p>	

EDUCATIONAL DATA

Have you taken the GRE? GRE _____ / _____
MM YY

SCORE: _____

List below all colleges and universities attended. Failure to list each institution may result in denial of admission or dismissal from the University.

Official transcripts are required from all regionally accredited colleges and universities where courses were taken for bachelor’s degrees. Transcripts must include degree(s) earned and date(s) conferred.

Transcripts from countries other than the United States may require evaluation from a United States evaluation service.

Name and Location (List School currently attending first)	Dates Attended	Degree	Date (if applicable)

READ CAREFULLY AND SIGN

I certify that the information on this application is complete and correct and understand that the submission of false information is grounds for denial of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action. I understand that the University expects a high standard of conduct from its students, and if accepted for admission, I will abide by all rules and regulations of the University as set forth in the University Catalog. I authorize the University to verify the information I have provided. I agree to notify the proper official of the institution of any changes in the information provided.

Applicant’s Signature

Date

UPON COMPLETION,
RETURN THIS APPLICATION TO: Schreiner University Phone: 830-792-7455 or 800-343-4919
 Graduate Studies, CMB 6232 Fax: 830-792-7382
 2100 Memorial Boulevard
 Kerrville, Texas 78028-5697

