



---

# FROSTBURG STATE UNIVERSITY GRADUATE ADMISSION APPLICATION

Office of Graduate Services  
141 Pullen Hall  
Frostburg State University  
Frostburg, Maryland 21532-2303  
301/687-7053  
FAX: 301/687-4597  
[www.frostburg.edu](http://www.frostburg.edu)

*Frostburg State University is an Affirmative Action/Equal Opportunity Institution.  
Admission shall be determined without regard to race, color, sex, national origin, age or handicap.  
Frostburg State University is committed to making all of its programs, services, and activities accessible  
to persons with disabilities. You may request accommodations through the ADA/504 Compliance Office,  
Hitchins Building 302, (301) 687-4102, TTD (301) 687-7955.*

Office of Graduate Services  
 Frostburg State University  
 Frostburg, Maryland 21532-2303  
 (301) 687-7053  
 FAX (301) 687-4597  
 www.frostburg.edu

# GRADUATE APPLICATION FORM

<b>E-mail Address:</b>			
Last Name	First Name	Middle Name	Social Security Number
Permanent Home Address		City	State Zip
County	Length of Residency Years: _____ Months: _____	Phone ( _____ ) _____	Birthdate Month: _____ Day: _____ Year: _____
Local Home Address		City	State Zip
Local Phone	Length of Residency Years: _____ Months: _____	Do you consider yourself eligible for In-State tuition? Yes <input type="checkbox"/> No <input type="checkbox"/> (Complete enclosed Residency Information Form)	
<b>Classification (check one)</b> <input type="checkbox"/> Graduate Degree <input type="checkbox"/> Graduate Non-Degree <input type="checkbox"/> Non-Degree/Certificate (check one) <input type="checkbox"/> Addictions Counseling Psychology <input type="checkbox"/> Child & Family Counseling Psychology <input type="checkbox"/> Educational Technology		<b>Campus Site:</b> <input type="checkbox"/> FSU <input type="checkbox"/> Hagerstown  <b>Semester you wish to enroll at FSU:</b> <input type="checkbox"/> Fall <input type="checkbox"/> Intersession Year _____ <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year _____  <b>Have you ever applied to FSU before?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Degree Program of Study (Check one)</b> <input type="checkbox"/> M.S. in Applied Ecology & Conservation Biology <input type="checkbox"/> M.S. in Wildlife/Fisheries Biology <input type="checkbox"/> M.S. in Counseling Psychology <input type="checkbox"/> M.S. in Applied Computer Science <input type="checkbox"/> M.S. in Parks and Recreational Resource Management <input type="checkbox"/> MBA/MSN Nursing (UMAB)		<input type="checkbox"/> Master of Business Administration <input type="checkbox"/> FSU: Master of Business Administration/BS Accounting <input type="checkbox"/> Master of Arts in Teaching - Elementary <input type="checkbox"/> Master of Arts in Teaching - Secondary (see reverse side for subject areas, please list preferred area) _____  <input type="checkbox"/> Master of Education (see reverse side for areas of concentration) M.Ed., list area of concentration and specialization _____	
<b>Citizenship:</b> <input type="checkbox"/> U.S. <input type="checkbox"/> Other Country Visa Type _____ Expiration Date _____		Do you request on-campus housing? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Gender: (optional)</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		Please check ethnic origin: (optional) For reporting purposes only <input type="checkbox"/> 1-Black <input type="checkbox"/> 4-Hispanic <input type="checkbox"/> 2-American Indian <input type="checkbox"/> 5-White, Non-Hispanic <input type="checkbox"/> 3-Asian/Pacific Islander <input type="checkbox"/> 6-Other	
<b>EDUCATIONAL BACKGROUND</b>			
<b>College History</b> – Please list <u>all</u> the colleges/universities you attended. List the most recent first.			
Name/Location	Dates of Attendance	Degree Earned	Graduation Date
<b>Tests taken:</b> <input type="checkbox"/> GRE Date _____ <input type="checkbox"/> MAT Date _____ <input type="checkbox"/> Praxis I Date _____ <input type="checkbox"/> Praxis II Date _____ <input type="checkbox"/> GMAT Date _____			
<b>High School History</b> – Please list high school from which you graduated.			
Name	County/State	Diploma Earned (Yes/No)	Graduation Date

**Master of Education: Areas of Concentration**

- Administration and Supervision (Elementary)
- Administration and Supervision (Secondary)
- Curriculum and Instruction (Elementary)
- Curriculum and Instruction (Secondary)
- Curriculum and Instruction (Educational Technology)
- Interdisciplinary
- Reading
- School Counseling
- Special Education (Elementary)
- Special Education (Secondary)

**Master of Arts in Teaching (Elementary)**

**Master of Arts in Teaching (Secondary)**

(Certification subject areas: Art, English, math, social science, physics, biology, chemistry, earth science, spanish, french)

3. In addition to the above mentioned items, the graduate applicant must also comply with the specific requirements of the graduate program to which they are applying as outlined in the current graduate catalog.
4. If you wish to enroll in graduate courses but do not intend to earn a degree or intend to pursue a certificate program only, you are considered a **Non-Degree** student. If this is your intention, please check the appropriate box in the "Classification" section of this application.

**GENERAL INFORMATION**

A \$30.00 application fee is required for the processing of the application. Please include a personal check or money order for \$30 made payable to Frostburg State University. DO NOT SEND CASH. Place the student's name and social security number on the check. **The fee is non-refundable. If you have previously paid an application fee to Frostburg State University, you need not submit this fee a second time.**

The non-refundable \$30 application fee should be forwarded with the Application Fee Transmittal Form to Accounts Receivable, Frostburg State University, Frostburg, Maryland 21532-2303.

**The University does not assume the responsibility of informing a student of the completeness of the application for admission. Please be sure that all forms included with this application are completed and signed. Please be sure that all required documents are provided as quickly as possible.**

**APPLICATION PROCEDURES**

1. Provide the Office of Graduate Services with official transcripts from each post-secondary institution you have attended. If you received your undergraduate degree from Frostburg State University, there is no need to request a transcript.
2. Failure to provide the Office of Graduate Services with all required admissions materials may result in the cancellation of the application and/or denial of further enrollment.

I certify that the statements made in this application are correct and complete. I understand that discovery of false information is grounds for immediate dismissal and forfeiture of all financial payments and academic credits.

If admitted, I agree to comply with all policies and regulations of Frostburg State University in effect while I am a student, and to assume responsibility for any financial obligations that I may incur.

I understand that all information furnished to the Office of Graduate Services in connection with this application will be treated confidentially, will be disclosed to University officials having a legitimate educational interest, and will become the property of the university. Should I be admitted to and enrolled at Frostburg State University, reports and recommendations on my behalf will not become a part of my permanent student record.

In making this application, I accept and agree to abide by the policies and regulations of Frostburg State University concerning drugs and alcohol abuse and understand that unlawful use of drugs or alcohol will subject me to penalties contained in those policies and regulations.

If the conditions affecting my residency status change, I will notify the University in writing, within fifteen (15) days of such change.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

