



# University of Wisconsin – River Falls

## APPLICATION FOR ADMISSION GRADUATE STUDIES

### Term Expected to Enter

- Fall       Summer  
 Spring    Winter (J-term)

Year: \_\_\_\_\_

**Send application to:**  
 Graduate Studies, 108 RDI  
 UW-River Falls  
 410 South 3<sup>rd</sup> Street  
 River Falls, WI 54022-5001  
 Fax: 715-425-3185

### FOR OFFICE USE ONLY

STUDENT ID \_\_\_\_\_  
 RESIDENCY: WI MN NR FOR  
 OVERALL GPA \_\_\_\_\_  
 LAST 2 YEARS GPA \_\_\_\_\_  
 ADMISSION: ADM REJ PROB  
 \_\_\_\_\_ FEE PAID

Name \_\_\_\_\_  
First Middle Last Former name(s)

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*

\*Inclusion of your social security number on this form is VOLUNTARY. If supplied, the number will be used as part of the university student record identification system. See back for more information.

Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mm/dd/yyyy

**Sex**  
 Male  
 Female

### Citizenship

- US Citizen  
 Resident Alien  
 Refugee       Nonresident Alien

Country of Citizenship: \_\_\_\_\_

Visa Status \_\_\_\_\_

### Veteran Status

- Not a Veteran  
 Veteran

### Racial/Ethnic Heritage

- American Indian/Alaska Native       Mexican-American/  
 Black/African American                      Mexican/Chicano  
 Cambodian                                       Other Race  
 Cuban     Other Asian  
 Hawaiian/ Pacific Islander                   Other Hispanic or Latino/a  
 Hmong     Puerto Rican  
 Laotian     Vietnamese  
 White

Permanent Home Address \_\_\_\_\_  
Street Address Apt. #

Since \_\_\_\_\_ mm/yy \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_  
Street Address City State Zip From mm/yy To mm/yy

Telephone Number(s) (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home  
 (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Work

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

Current Employer \_\_\_\_\_  
 \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_  
Job Title mm/yy mm/yy

### List all institutions of higher education attended (use additional paper if necessary):

School Name	City/State	From: (mm/yy)	To: (mm/yy)	Degree Earned (mm/yy)	Major

**NOTE: Applicants for a degree or certificate must provide one official transcript from all institutions attended as an undergraduate student, sent directly to Graduate Studies from the institution**

### Temporary Graduate Students

- I want to be admitted as a TEMPORARY graduate student to take graduate-level classes without receiving a degree or certification. Please skip to and complete the Residency and Tuition Information section, sign the application form, and send to Graduate Studies. The processing fee is waived.

# Academic Plan for Degree- and Certificate-Seeking Students

*Select one of the academic plans below.*

## Agricultural Education, Master of Science

Option (check one)

- Professional Development in Agricultural Education<sup>†</sup>
- Sustainable Community Development
- Professional Licensure in Agricultural Education

## Alternative Education

Option (check one)

- Certificate
- Wisconsin Licensure<sup>†</sup>

## Communicative Disorders

Option (check one)

- Master of Science\*
- Master of Science in Education-Secondary Education

Business Administration, Master\*

Counseling, Master of Science in Education\*

Elementary Education, Initial Licensure, Master of Science in Education

Learning Disabilities Licensure<sup>†</sup>

## Professional Development, Master of Science in Education

Option (check one)

- Shared Inquiry Community
- Principal Licensure\*<sup>†</sup>

School Psychology, Master of Science in Education/Education Specialist\*

## Secondary Education

Status (check one)

- Initial Licensure
- Master of Science in Education (post-certification)<sup>†</sup>

Concentration (check one)

- Communicative Disorders\*
- Fine Arts
- Literature, Communication and Language (initial certification only)
- Mathematics
- Social Science
- Science/Biology
- Science/Chemistry
- Science/Geology Earth Science
- Science/Physics

## Reading

Option (check one)

- Master of Science in Education<sup>†</sup>
- Licensure, Reading Teacher<sup>†</sup>

Technology for Educators Certificate

## Teaching English to Speakers of Other Languages (TESOL)

Option (check one)

- Certificate
- Master of Arts

\* These programs require additional application materials and/or have application deadlines. Contact Graduate Studies or visit <http://www.uwrf.edu/graduatestudies> for details.

<sup>†</sup> For these programs, please provide the following information:

Teaching Licensure \_\_\_\_\_  
Date Awarded      State      Subject area(s)      Grades

### Residency and Tuition Information

The following information is used to determine appropriate tuition rates. Review the following statements and select **all** that apply to you:

- I have lived continuously and only in Wisconsin since: \_\_\_\_\_ (mm/yy).
- I have filed Wisconsin state income (not property) tax returns as a resident for the past 2 years.
- I recently moved to Wisconsin to begin full-time employment and intend to maintain a permanent home in Wisconsin. (Some or all of the following may be required as proof: employer statement, WI driver's license, voter/auto registration.)
- I graduated from a Wisconsin high school AND my parents currently reside in Wisconsin and have done so for at least 12 months or did at the time of their deaths.

List former addresses, if any, during the last two years (use additional paper if necessary):

\_\_\_\_\_

By act of the WI legislature, students applying to enter graduate programs must pay a nonrefundable \$56 application fee before processing of the application will begin. This fee is valid for one year (two semesters and a summer session). The fee is waived for TEMPORARY students, but only 9 credits earned in temporary status may be applied toward a degree. An applicant who submits forged, altered, or falsified documents will not be admitted, and documents will be turned over to the proper authorities. I understand that submitting such documents is considered fraudulent and certify that the information provided on this form is truthful.

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

### Information Pertaining to the Disclosure of Social Security Number

Federal law allows the UW System to request and use your social security number. While you are not legally required to provide your social security number on this form, you are strongly encouraged to do so. You will be required to provide your social security number when you apply for financial aid or the new educational tax benefits.

Federal law (20 U.S.C. 1232g; 34 C.F.R.s.99.1 et seq.) recognizes the student social security number as "personally identifiable information." Accordingly, this information may only be disclosed under certain circumstances, including the following: to other institutional officials; to representatives of state and local educational authorities; in connection with financial aid; for research; to collection agents in connection with university-related business; pursuant to an order from a court of law; and in other circumstances as required by state or federal law.

If you intend to apply for financial aid, the social security number is required. As applied to financial aid, it may be used for a number of purposes, including verification of identity of the borrower or recipient and as an account number throughout the life of a loan; determination of program eligibility; certification of enrollment and student status; determination of eligibility for deferment, cancellation or repayment by third parties; determination of eligibility for disability or death claims; and, in case of delinquent or defaulted loans, for tracing the borrower and collecting.