



GRADUATE & PROFESSIONAL STUDIES APPLICATION

GPS 06/11 FOR OFFICE USE ONLY Date _____

CC / CK \$ _____ Authorization/CK # _____

SAC-ID _____ AC-ID _____

OTHER _____

Complete the application online at:
online.sjcme.edu

PERSONAL INFORMATION Please print clearly.

1. Social security number _____
Your social security number (SSN) is used to verify your identity for administrative, financial aid and VA benefits. If not provided on your admission application, you will be required to provide it at a later date.
2. Full legal name Mr. Mrs. Ms. (circle one)

Last First Middle

Maiden Name / Previous Name

3. Mailing address _____
Street Apt.

City State Zip Code Country

4. Home phone (_____) _____ Work phone (_____) _____
Indicate preferred contact phone number.

E-mail _____ Mobile (_____) _____

5. Date of Birth _____ Place of Birth _____ Citizenship: U.S. _____ U.S. Permanent Resident _____ Other _____ Country _____ Visa Type _____

ACADEMIC PROGRAM Please check only one.

GRADUATE PROGRAMS

- Master of Accountancy
- Master of Arts in Pastoral Theology
- Master of Business Administration
- *Master of Health Administration
- *Master of Science in Education
- *Master of Science in Nursing
 - Family Nurse Practitioner
- Joint Degrees: MSN/MHA; MSN/MBA
(circle one)

Certificates

- Catholic Health Leadership (MHA)
- Catholic School Leadership (MSED)
- Nursing Health Care Education (MSN)
- Nursing Administration & Leadership (MSN)
- School Leadership (MSED)
- Post-Certificate of Advanced Graduate Study: Interdisciplinary
- Post-Certificate MSN-FNP
- Certificate of Graduate Study

UNDERGRADUATE PROGRAMS

Bachelor of Arts

- Theological Studies

Bachelor of Science

- *Business Administration
- *General Studies
- Health Administration
- *Long-Term Care Administration
- Nursing: RN to BSN
- Radiologic Science Administration
(for Radiologic Technologists)

Associate of Science

- Adult Education & Training
- Business Administration
- Criminal Justice
- General Studies
- Human Services
- Psychology
- Radiologic Science Administration

Certificates

- Adult Education & Training
- Health Administration
- Long-Term Care Administration

* Please specify specialization: _____

If you are enrolling as a graduate from a 3+1 community college, please indicate the school: _____

ETHNICITY/RACE INFORMATION (Optional/Voluntary) How do you describe yourself? Check one.

- African American or Black (non-Hispanic)
 Native American
 Hispanic (incl. Puerto Rican)
 White or Caucasian (non-Hispanic)
 Asian/Pacific Islander
 Other (Specify): _____

Saint Joseph's College of Maine admits students without regard to race, color, religion, national or ethnic origin, gender, age, or disability to all the rights, privileges, programs and activities generally accorded or made available to students at the College. The College does not discriminate on the basis of race, color, religion, national or ethnic origin, gender, age, or disability in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school administered programs.

Saint Joseph's College is also authorized under Federal Law to enroll nonimmigrant alien students.



PREVIOUS EDUCATION Please use an additional sheet of paper, if necessary.

List all past education and have official transcripts sent directly from these institutions to: Enrollment Services, Graduate & Professional Studies, 278 Whites Bridge Road, Standish, ME 04084-5263. Evaluation will not take place until receipt of all transcripts. Continuing Education students are exempt from having to send transcripts. High School transcripts are required only if no undergraduate credits have been earned.

1. List high school or General Educational Development (GED) information and submit a copy of the diploma or certificate:

High School/Address	Dates Attended	Diploma/GED Awarded
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2. List undergraduate institutions attended including, community college, technical, nursing or allied health schools:

Institution/Address	Dates Attended	Sem. Hr. Credit Earned	Credentials/Degree & Year (degree, certificate, diploma, etc.)
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3. List graduate institutions attended:

EMPLOYMENT INFORMATION

1. Place of employment _____ Position / Title _____

2. Length of employment in current position _____ Total years of experience in field _____

3. Is your employer an Education Partner with Saint Joseph's College? Yes No List Partner: _____

MILITARY STATUS

1. Are you applying for VA education benefits? Yes No If YES, under what chapter? _____

2. Are you: Active Duty Military? National Guard Reserves? Military Spouse? If YES, are you using Tuition Assistance or MyCAA? Yes No If YES, please enter the military branch and the military installation: _____

HAVE YOU EVER BEEN ENROLLED IN A DEGREE PROGRAM AT SAINT JOSEPH'S COLLEGE? Yes No

HOW DID YOU HEAR ABOUT US? Please tell us how you heard about Saint Joseph's College of Maine:

INTERNATIONAL APPLICANTS ONLY

Foreign-born applicants from non-English speaking nations must submit a satisfactory TOEFL score at the time of application to any program in order to gain acceptance, regardless of other credentials, unless graduated from an English-speaking school at the secondary level. In addition to recording the TOEFL score below, the official TOEFL scores must be sent by the testing agency directly to Enrollment Services, Graduate & Professional Studies. TOEFL Score _____

PAYMENT INFORMATION Please enclose the appropriate fees with this application.

Application fee for all degree programs: \$50. Certificate and continuing education programs: \$25.

1. Are you eligible for employer tuition reimbursement? Yes No

2. Will you be applying for financial aid? Yes No If YES, circle all that apply: Federal / State / Local

3. Method of payment: Check/Money Order Credit Card (circle one) MasterCard / VISA / Disc / AMEX 3-Digit Security Code _____

Amount authorized to be charged \$ _____ Card Number _____ Expiration Date _____

Print name as shown on card _____ Signature _____

AGREEMENT

- I, the undersigned, certify to the best of my ability and knowledge that the information given on this application is correct. I understand that any misrepresentation may be cause for refusal of admission or subsequent dismissal.
- I understand that any material submitted in support of my application will be held confidential by the Admissions Department of the Division of Graduate & Professional Studies, unless I give permission otherwise.
- I hereby give permission to Saint Joseph's College to use my name and any school photograph in which I may appear in various promotional materials.
- I understand that, as with any other institution of higher education, credits earned at Saint Joseph's College are transferable only at the discretion of the receiving institution.
- I understand that a non-refundable application fee is required for processing this application.

Print Name _____

Signature _____

Date _____

