

Application for Graduate Admission



Student Affairs Office | OSU Center for Health Sciences | 1111 W. 17th Street | Tulsa, OK 74107-1898 | Fax: (918) 561-8243

Please type or print. Send to the above address, along with a check or money order in U.S. dollars, payable to OSU Center for Health Sciences, for the Application Fee: \$40.00 for U.S. citizens or \$75.00 for International applicants. Application will not be processed until fee is submitted.

Contact and Personal Information

Social Security Number _____ Gender Male Female
COMPUTER USERS: To select an option, highlight the box and hit the x key

Name _____
Last Name First Name Middle Initial Maiden Name

Current Address _____
Number & Street City State Zip/Postal Code Phone - (Area Code) Number

Date of Birth _____ Birthplace _____
Month/Day/Year City State County

Legal Residence _____
State County Country Years at the above address

Ethnicity (optional) American Indian or Alaskan - Specify tribe: _____ Black, Non-Hispanic White, Non-Hispanic
 Asian or Pacific Islander Hispanic Other: Please specify _____

Citizenship US Citizen Non-resident, International Resident, permanent
Please submit International Application Please submit a copy of your PR card

Permanent Address _____
Number & Street City / County State Zip/Postal Code Phone - (Area Code) Number

Business Phone _____ Fax No. _____ E-mail address _____
(Area Code) Number (Area Code) Number

Enrollment and Admission Information

Proposed Major Biomedical Sciences Forensic Sciences Degree or Program Sought M.S. (Research and Thesis) M.S. (Non-Thesis) Graduate Certificate Questioned Documents Ph.D. (Biomedical Only)

Option or Specialization within major _____
Required in Forensic Sciences

Semester and year you expect to enroll _____
 Summer Fall Spring Of Year

Enrollment Type On-campus Internet course Degree applicant Special student _____
Check all that apply Extra fee involved Special students must complete special student memo All degree applicants must complete Proposed Major and Degree Sought above. Check Special Student only if you want to enroll even if not admitted as a graduate student OR if you only want to take classes as a non-program graduate student. Please use 4-digit format --2004

Have you previously applied for admission to the Graduate College at Oklahoma State University? Yes No

Have you ever attended OSU? Yes No Date you were last enrolled _____

If you are currently an OSU graduate student, are you: Graduating from one graduate program and applying to another? Transferring to another program? Other (explain): _____

Academic History

List all institutions at the college level attended, including any university you are currently attending. Please note expected date of graduation and degree to be awarded. Failure to report all undergraduate and graduate institutions attended may result in dismissal or loss of credit. Please have two transcripts sent directly from each college/university to the OSU-CHS Student Affairs office at address above. All other information required by the intended program may be sent to the same address; i.e., vita, application letter, recommendation letters, employment information, and test scores.

University & Location	Dates Attended	Major Field	Degree	Date Conferred or to be conferred
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PLEASE INITIAL: ____ I understand that the Family Education Rights and Privacy Act of 1974 provides a student access to his/her educational record and that the student retains the right to waive access to specific documents in his/her record. I also agree to indicate an identical choice to waive or not to waive my access to recommendations on all related forms and that otherwise this application becomes null and void.

CHECK ONE: I waive do not waive my right to see letters of recommendation submitted to support this application.

If convicted of a felony, you must provide a written explanation prior to your admission. I certify that the statements in this application are true and complete to the best of my knowledge, and that I have attended no institution other than those listed above. **Revised 08/24/09**

_____ Date

_____ Signature of Applicant (Required)