

# Application for Graduate Admission

Graduate Admissions Office (MS \_\_\_\_\_) • Fairfax, Virginia 22030

Please complete the application and send it to the admissions office with a nonrefundable application fee of \$75 in the form of a check or money order. You may opt to pay by Visa or Mastercard using the Credit Card Authorization Form on page 20. Cash will not be accepted. Please print applicant's name and Social Security Number (optional) on check. **Apply online to save time and money at admissions.gmu.edu.**

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|--|--|--|
|  |  |  |
|--|--|--|

Social Security Number (optional)

E-mail Address \_\_\_\_\_

## Personal Information

|                                   |  |                     |  |                         |                |
|-----------------------------------|--|---------------------|--|-------------------------|----------------|
| Last or Family Name _____         |  | First _____         | MI _____                                   | Other/Maiden Name _____ |                |
| Permanent Address:                |  |                     | Present Mailing Address: valid until _____ |                         |                |
| Street _____                      |  | Apt. No. _____      | Street _____                               |                         | Apt. No. _____ |
| City _____                        |  | State _____         | City _____                                 |                         | State _____    |
| Country _____                     |  | Country _____       |  | Country _____           |                |
| (H) _____ (W) _____               |  | (H) _____ (W) _____ |  | (H) _____ (W) _____     |                |
| Area Code and Telephone No. _____ |  |                     | Area Code and Telephone No. _____          |                         |                |

## Demographic Data (optional)

The following questions are for our information only. Your answers will not affect your chances for admission to the university. Your cooperation is requested but not required. For more information on this section and services available for noncitizens, please visit [www.gmu.edu/equity](http://www.gmu.edu/equity) and [oips.gmu.edu](http://oips.gmu.edu).

Male    Female   **Ethnic Group/Race:**    Black, not of Hispanic origin    Asian    Caucasian  
 Hispanic    Native American    Other \_\_\_\_\_   Month/Day/Year

### Citizenship:

- U.S.    Permanent Resident Alien  
 Non-U.S. Citizen/Nonpermanent Resident    Student Visa (F-1 or J-1) (Students seeking F-1 and J-1 visas must complete the Form for Applicants Seeking F-1 or J-1 Student Visas at admissions.gmu.edu.)  
 Other, please specify: \_\_\_\_\_

**For all non-U.S. citizens: Country of citizenship** \_\_\_\_\_

## Program Information

**Attendance Plans:**    Degree or    Certificate   **Candidate Term of Entrance:**   **Expected Number of Credits:**  
 Full time (9 or more credits)    Fall \_\_\_\_\_   Fall \_\_\_\_\_  
 Part time (8 or fewer credits)    Spring \_\_\_\_\_   Spring \_\_\_\_\_  
 Summer \_\_\_\_\_   Summer \_\_\_\_\_

### Indicate below which degree or certificate you are seeking (check only one):

- MA    MBA    MM    MS    DA  
 MAIS    MEd    MPA    MSN    MSN/MBA  
 MAT    EMBA    MFA    MPP    PhD  
 Initial Teacher's Licensure with MEd option    MSW    Certificate program

Program of Study (refer to the online Graduate Program Requirements for program codes):

|               |                          |  |
|---------------|--------------------------|--|
| Program _____ | Degree/Certificate _____ | Concentration or Track (if applicable) _____ |
|---------------|--------------------------|--|

**Have you sought graduate admission to George Mason University previously?**    Yes    No

If yes, check one and specify:

Applied but did not enroll    Applied and enrolled \_\_\_\_\_  
Term and Year   Program

**Is English your first language?**    Yes    No   If "No," indicate first language \_\_\_\_\_

## Other Required Information

Have you ever been convicted of a felony?    Yes    No (If yes, please provide the date(s) of each conviction(s) \_\_\_\_\_ and an explanation of each occurrence on a separate sheet of paper.)  
 Are you or have you been under suspension or dismissal for academic or disciplinary reasons from any college, university, or other formal postsecondary educational program?    Yes    No (If yes, attach an explanatory statement.)

## Honor Code

George Mason University shares the tradition of an honor system that has existed in Virginia since 1842. The Honor Code is an integral part of university life, and it is the student's responsibility to understand the provisions of the code. Attempted cheating, plagiarism, lying, and stealing constitute Honor Code violations. In the spirit of the code, students and faculty members must report all violations to the Honor Committee. The complete Honor Code can be found in the *University Catalog*. I will read and accept the responsibility of the Honor Code if I am approved for admission to George Mason University.

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

# Application for In-State Tuition Rates

Office of Admissions, 4400 University Drive, MS 3A4, Fairfax, Virginia 22030 • Fax: 703-993-4622

This form must be completed if you are claiming entitlement to Virginia in-state tuition rates pursuant to Section 23-7.4, *Code of Virginia*. **All questions must be answered.** Section A must be completed by the applicant. Section B of this form must be completed by the parent, spouse, or legal guardian. **Supporting documents and additional information may be requested.** Admitted students who register for classes while in pending domicile status will be assessed out-of-state tuition rates.

## Section A—Applicant

1. Name of Applicant \_\_\_\_\_
2. Social Security No. \_\_\_\_\_ (Optional)    3. Date of Birth \_\_\_\_\_
4. Citizenship Status     U.S.     Permanent Resident     Non-U.S. Citizen, Nonpermanent Resident  
 Do you have a pending Permanent Resident status?     Yes     No    If yes, please indicate your previous visa status \_\_\_\_\_  
 Indicate the type of visa you currently hold: \_\_\_\_\_ Award Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
5. How long have you lived in Virginia? \_\_\_\_\_
6. Do you currently live outside of Virginia but consider yourself to be a Virginia resident? ..... Yes  No
7. Where have you lived for the past two years? List current address first:  

| From (mo./yr.) | To (mo./yr.) | Street Address | City | State | Zip Code |
|----------------|--------------|----------------|------|-------|----------|
|                |              |                |      |       |          |

**Students under the age of 24 are presumed to be dependent on a parent, spouse, or legal guardian unless one of the following factors apply:**

8.
  - a. Are you age 24 or older (as of the first day of the term in which you intend to enroll)? ..... Yes  No
  - b. Are you a veteran or active duty member of the U.S. armed forces? ..... Yes  No
  - c. Are you a ward of the court or were you a ward of the court until age 18? ..... Yes  No
  - d. Are both of your parents deceased and you have no adoptive or legal parents? ..... Yes  No
  - e. Are you a graduate/professional student? ..... Yes  No
  - f. Do you have a legal dependent(s) other than your spouse (e.g., child)? ..... Yes  No
  - g. Are you married? ..... Yes  No
9. If you are currently enrolled in a public college or university, please list the school: \_\_\_\_\_  
 Are you paying in-state tuition rates? ..... Yes  No
10. Do your parents, spouse, or legal guardian(s) provide more than half of your financial support or claim you as a dependent?  
**If yes, Section B must also be completed by parent, spouse, or legal guardian.** ..... Yes  No
11.
  - a. For the 12 months prior to the term in which you will enroll, will you have you filed a Virginia income tax return or paid income tax on all earned income? ..... Yes  No
  - b. Are you exempt from filing an income tax return? ..... Yes  No
 If no, where did you file a tax return or pay income taxes? \_\_\_\_\_
12. For the 12 months prior to the term in which you will enroll, have you
  - a. been a registered voter in Virginia? ..... Yes  No
  - b. held a valid Virginia driver's license? ..... Yes  No
  - c. had your motor vehicle registered in Virginia? ..... Yes  No
13. Are you an active duty member of the U.S. armed forces? ..... Yes  No   
 If no, skip to Question 14.  
 Are Virginia income taxes currently paid on all military income? ..... Yes  No   
**If yes, provide the Office of Admissions with copies of your military orders and an LES or State of Legal Residence Certificate showing Virginia as your state of legal residence for income tax purposes. If no, provide a copy of your military orders, ID card, and lease/deed.**
14. Are you the dependent of a military parent, spouse, or legal guardian with military orders to VA who also resides in VA? ..... Yes  No   
**If yes, have the military member complete Part B (questions 1, 5, 9, and signature) and provide the Office of Admissions with copies of the following documentation: military member's ID card, military dependent ID card, lease/deed, and military orders. Deadline for submissions: Last day of Add Period.**

Please note: Form continues on next page

Name: \_\_\_\_\_ SSN (optional) \_\_\_\_\_

## Application for In-State Tuition Rates

15. Are you currently not living in Virginia or any of the states that have reciprocal tax provisions with Virginia: MD, DC, PA, WV, or KY? ..... Yes  No   
If yes, will you have worked in Virginia and earned at least \$11,200 and paid Virginia income taxes for the past 12 months?..... Yes  No

**If yes, provide the Office of Admissions with copies of the following documentation: state and federal income taxes and current pay stub.**

*I certify under penalty of disciplinary action that the information I have provided is true.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

### Section B—Parent, Legal Guardian, or Spouse

1. Name of  Parent  Legal Guardian or  Spouse \_\_\_\_\_
2. Citizenship Status  U.S.  Permanent Resident  Non-U.S. Citizen, Nonpermanent Resident  
Do you have a pending Permanent Resident status?  Yes  No If yes, please indicate your previous visa status \_\_\_\_\_  
Indicate the type of visa you currently hold: \_\_\_\_\_ Award Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
3. How long have you lived in Virginia? \_\_\_\_\_
4. Do you currently live outside of Virginia but consider yourself to be a Virginia resident? ..... Yes  No
5. Where have you lived for the past two years? **List current address first:**
- | From (mo./yr.) | To (mo./yr.) | Street Address | City | State | Zip Code |
|----------------|--------------|----------------|------|-------|----------|
|                |              |                |      |       |          |
|                |              |                |      |       |          |
6. Do you provide more than half of the financial support for the applicant or claim the applicant as a dependent on your federal and Virginia income tax returns? ..... Yes  No
7. a. For the 12 months prior to the term in which your dependent will enroll, will you have you filed a Virginia income tax return or paid income tax on all earned income? ..... Yes  No   
b. Are you exempt from filing an income tax return?..... Yes  No   
If no, where did you file a tax return or pay income taxes? \_\_\_\_\_
8. For the 12 months prior to the term in which your dependent will enroll, will you have  
a. been a registered voter in Virginia? ..... Yes  No   
b. held a valid Virginia driver's license? Yes n..... Yes  No   
c. had your motor vehicle registered in Virginia? ..... Yes  No
9. Are you an active duty member of the U.S. armed forces? ..... Yes  No   
If no, skip to Question 10.  
a. Are Virginia income taxes currently paid on all military income? ..... Yes  No   
**If yes, provide the Office of Admissions with copies of your military orders and LES or State of Legal Residence Certificate showing Virginia as your state of legal residence for income tax purposes, current Virginia driver's license, and vehicle registration.**  
b. Is the person who completed Part A of this form your dependent? ..... Yes  No   
c. Are you residing in Virginia with orders to a military base/installation/post in Virginia or a contiguous state?..... Yes  No   
**If yes to questions 9b and 9c, provide the Office of Admissions with copies of military orders, the dependent ID card, and lease/deed. Deadline: End of Add Period.**
10. Are you currently not living in Virginia or any of the states that have reciprocal tax provisions with Virginia: MD, DC, PA, WV, or KY? ..... Yes  No   
If yes, will you have worked in Virginia and earned at least \$11,200 and paid Virginia income taxes for the past 12 months?..... Yes  No   
**If yes, provide the Office of Admissions with copies of the following documentation: state and federal income taxes, current pay stub, and a copy of this form.**

*I certify that the information I have provided is true.*

Signature of Parent, Spouse, or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Additional Comments:**

**Note: The Office of Admissions makes an initial domicile decision based on the information provided on this form. All students classified by the Office of Admissions as out of state for tuition purposes have the right to appeal. Review the following guidelines before beginning your appeal: [registrar.gmu.edu/students/domicile/appeal.html](http://registrar.gmu.edu/students/domicile/appeal.html).**

## Academic Background

\_\_\_\_\_  
Last or Family Name

\_\_\_\_\_  
First

\_\_\_\_\_  
MI

\_\_\_\_\_  
Other

\_\_\_\_\_  
Social Security Number (optional)

\_\_\_\_\_  
Program

\_\_\_\_\_  
Degree/Certificate

\_\_\_\_\_  
Concentration or Track

With the most recent first, list all colleges, universities, and professional and graduate schools attended, and any school in which you are currently enrolled, including George Mason University nondegree study programs (also list any proprietary schools).

| Institution Code* | Name and Location of Institution (undergraduate and graduate) | Dates Attended |    | Major/Degree | Credits/Quality Points | Overall GPA |
|-------------------|---|----------------|----|--------------|------------------------|-------------|
|                   |   | From           | To |              |                        |             |
|                   |   |                |    |              |                        |             |
|                   |   |                |    |              |                        |             |
|                   |   |                |    |              |                        |             |
|                   |   |                |    |              |                        |             |
|                   |   |                |    |              |                        |             |

\*Insert Institution Code from GMAT or GRE bulletin, if known; otherwise, leave blank.

Calculate your GPA below. Compute your undergraduate GPA on a 4.00 system, using A=4, B=3, C=2, D=1, and F=0. Refer to the application instructions on page 3 for further information on calculating GPAs.

| Undergraduate GPA  |                    |                      |              | Last 60 hours of bachelor's degree   |                    |                      |              | GPA for all postbaccalaureate work   |                    |                      |              |
|--|--------------------|----------------------|--------------|--|--------------------|----------------------|--------------|--|--------------------|----------------------|--------------|
| Grade  | Total # of Credits | Multiply by          | Grade Points | Grade  | Total # of Credits | Multiply by          | Grade Points | Grade  | Total # of Credits | Multiply by          | Grade Points |
| A  |                    | x 4 =                |              | A  |                    | x 4 =                |              | A  |                    | x 4 =                |              |
| B  |                    | x 3 =                |              | B  |                    | x 3 =                |              | B  |                    | x 3 =                |              |
| C  |                    | x 2 =                |              | C  |                    | x 2 =                |              | C  |                    | x 2 =                |              |
| D  |                    | x 1 =                |              | D  |                    | x 1 =                |              | D  |                    | x 1 =                |              |
| F  |                    | x 0 =                | 0            | F  |                    | x 0 =                | 0            | F  |                    | x 0 =                | 0            |
| <b>Totals:</b> _____   |                    | <b>Totals:</b> _____ |              | <b>Totals:</b> _____   |                    | <b>Totals:</b> _____ |              | <b>Totals:</b> _____   |                    | <b>Totals:</b> _____ |              |
| GPA = $\frac{\text{Total Grade Points}}{\text{Total \# of Credits}}$ = _____ |                    |                      |              | GPA = $\frac{\text{Total Grade Points}}{\text{Total \# of Credits}}$ = _____ |                    |                      |              | GPA = $\frac{\text{Total Grade Points}}{\text{Total \# of Credits}}$ = _____ |                    |                      |              |

## Test Data

Please complete the information requested below. Include the month and year of the test you have taken or plan to take.

GRE Aptitude \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date V Q A/W

GRE Subject \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Score

LSAT \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Score Percentile Rank

GMAT \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date V Q A

MAT \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Score

IELTS Academic \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Score

TOEFL \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Score Essay Score

Praxis \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date R W M

## Certification or License

Please list current certification(s) or license(s) held.

Teaching \_\_\_\_\_ Endorsement \_\_\_\_\_ State \_\_\_\_\_

License \_\_\_\_\_ State \_\_\_\_\_

Other \_\_\_\_\_

## Financial Aid, Assistantships, and Military/Student Benefits

Check the appropriate boxes. Are you applying for

- [Y] Financial Aid—Please complete the Free Application for Federal Student Aid (FAFSA) as soon as possible after January 1 for the upcoming academic year. (You must submit financial aid transcripts for all previous schools attended to the Office of Student Financial Aid.)
- [T] Teaching Assistantship (6 credits per term)
- [R] Research Assistantship (6 credits per term)

Military/Student Benefits

- Veteran with benefits [1]
- Veteran with no benefits [2]
- Not applicable [3]
- Veteran dependent with benefits [4]
- Active duty with benefits [5]
- Active duty with no benefits [6]
- Selective reserve with benefits [7]
- Eligible for Virginia War Orphans benefits [8]
- Veteran's Education Assistance Program [9]

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**Honors,  
Awards, and  
Publications**

Please list scholarships, fellowships, academic awards, honors, special recognitions, or publications.

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**Employment  
Background**

Please refer to the Graduate Program Requirements Chart to find the programs requiring résumés. If one is required of your program, please submit a résumé indicating company or organization, location and type of business, title of position, dates of employment, and your responsibilities.

If your program does not require a résumé, please list below your last two professional experiences if they are relevant to your application.

| Name and Location of Employer | Position | Nature of Work | Dates |
|-------------------------------|----------|----------------|-------|
|                               |          |                |       |
|                               |          |                |       |
|                               |          |                |       |
|                               |          |                |       |

Will your employer sponsor your attendance?  Yes  No

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**Goals  
Statement**

*Statements should be 750 to 1,000 words. Please print or type your name and G number on all additional sheets of your application.* Return the goals statement to the appropriate graduate admissions office with the application.

**Master's and Doctoral Applicants**

On a separate sheet, state your professional plans and career objectives. Please include your personal qualities and development and how they have influenced your career choice; your reasons for this particular degree in relation to your academic background, professional work experience, and career goals; and your reason for selecting your program at George Mason University.

**Doctoral Applicants Only**

In addition to the goals statement above, the Admissions Committee is interested in which fields you expect to do doctoral study and research; how these interests have been influenced by your prior education, research, or work experience; why you are considering a career in an academic, research, or clinical setting; and any information relevant for evaluating your motivation to study and conduct research at the doctoral level.

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**Letters of  
Recommendation**

Confidential letters of recommendation have been submitted by the following people:

|         |                       |                    |                |
|---------|-----------------------|--------------------|----------------|
| Name    | Position/Organization | Telephone          | E-mail Address |
| Address | City                  | State (or Country) | Zip Code       |
| Name    | Position/Organization | Telephone          | E-mail Address |
| Address | City                  | State (or Country) | Zip Code       |
| Name    | Position/Organization | Telephone          | E-mail Address |
| Address | City                  | State (or Country) | Zip Code       |

**Please note:** Information contained in this application will be provided to Virginia state agencies as required by law.

I certify all information given on the application is complete, true, and correct.

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