



■ Please print all information and check the appropriate boxes

■ \$50 application non-refundable fee is required.

APPLICANT INFORMATION

CSU ID or Social Security Number _____

Name _____
Last First Middle Sr., Jr., Etc.

Permanent Address _____
Number and Street Work Phone (Include Area Code) Home Phone (Include Area Code)

_____ City State Zip Country (If not U.S.)

Mailing Address _____
 (or check if same as above) Number and Street Telephone (Include Area Code)

_____ City State Zip Country (If not U.S.)

Former/Maiden Name (if applicable) _____

Personal Email Address _____

Date of Birth

Sex

Citizenship Status

Ethnic Origin

Month, Day, Year

Male
 Female

U.S. Citizen
 Non-Resident Alien - A student who is not a U.S. Citizen or U.S. Permanent resident, must submit an International Application
 Resident Alien (Permanent Resident) (If Resident Alien, attach form I-551: Permanent Visa Card)

Are you Hispanic or Latino?
 Yes No
 White
 Asian
 Black or African American
 American Indian or Alaskan Native
 Native Hawaiian or Other Pacific Island

Native Language

English
 Other _____
Specify

County of Permanent Address _____ Country of Citizenship _____

Residency Status: Are you applying for In-State Tuition? Yes No

Are you a legal resident of Georgia? Yes, How long? _____ / _____ No, Resident of what state? _____
Years / Months

Are you a legal resident of Chambers, Lee, or Russell County in Alabama? _____ Yes, How long? _____ / _____ No
County Years / Months

Have you or your parents filed a Georgia Income Tax Return as a resident of Georgia? Yes, Last year filed? _____ No

Are you currently active duty military or a dependent of someone who is active military? Yes No Home State of Record: _____

If currently active duty or a dependent of someone who is active duty, are you stationed in Georgia? Yes No

Are you registered to vote in the state of Georgia? Yes No

Do you hold a drivers license issued by the State of Georgia? Yes No

Note: For fee assessment purposes, documentation to support the above statements may be required

EMERGENCY INFORMATION

Name _____
Last First Middle Sr., Jr., Etc.

Telephone Number (include area code) _____

ACADEMIC INFORMATION

Year and semester you plan to attend: Fall 20____ Spring 20____ Summer 20____
Classification: Degree Seeking Transient Audit Non-Degree*
*(Restrictions apply - re-certification or endorsement)

[Click here for a list of degree options](#)

Intended Program of Study _____ Degree Objective _____

Do you hold a valid teaching certification? Yes No If yes, what state? _____

Type (level) of certification _____ Area (field) of certification? _____

What is the name of the school district you are currently employed? _____

What is the name of the school where you are currently employed? _____

All previous educational experience

(Include prior attendance at Columbus State University. Failure to list all institutions previously attended may result in academic exclusion or loss of transfer credit.)

Institution	Location City, State	Attendance From/To	Graduation Date	Degree Obtained/Hours Completed
Last College				
College				
College				
College				
College				
College				

ADDITIONAL INFORMATION

1. Have you ever applied to CSU as an undergraduate or graduate student? Yes No If yes, date _____, _____
2. Have you ever been enrolled at CSU as an undergraduate or graduate student? Yes No
3. Are you currently enrolled in the last institution attended? Yes No If yes, request final transcript be sent to the CSU Admissions Office.
4. Telephone number where you can be reached during the day _____
5. State briefly why you want to attend CSU _____
6. Have you ever been convicted of any criminal offense other than a traffic violation or do you have charges pending? Yes, explain on a separate sheet. No
7. If you are part of the military community, please answer the question(s) below that best fit your status:
Are you Active Duty Military? Yes No Or are you a dependent of someone who is Active Military? Yes No
Are you a Reservist? Yes No Or are you a dependent of someone who is a Reservist? Yes No
Are you a Veteran? Yes No Or are you a dependent of someone who is a Veteran? Yes No

If you will need any special services while on campus because of a disability, please contact our Office of Disability Services at 706-507-8755.

CERTIFICATION

All applications and documents required must be received in the Admissions Office by the published deadline date.

- I agree to abide by Columbus State University Regulations. All personal data and special categories of sensitive personal data collected or processed by the USG must comply with the USG Cybersecurity Plan, as authorized by the Board of Regents Policy Manual Section 10.4 Cybersecurity: www.usg.edu/policies. Anyone suspecting his or her sensitive personal data has been exposed to unauthorized access, report your suspicion to helpdesk@usg.edu. Otherwise, questions concerning general data privacy can be forwarded to dataprivacy@usg.edu. Signature (below) and submission of this application provides consent to and acknowledgment of the USG Privacy Policy.
- I understand that any material false statements made knowingly and willfully by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution. Further I certify that, to the best of my knowledge, the information submitted on this application is true and complete.
- Further, I certify that by electronically signing my name, I grant CSU permission to process this official application as a potential student.

Signature _____ Date _____



COLUMBUS STATE
UNIVERSITY

Graduate Admission Application

Admissions Office • Columbus State University • 4225 University Avenue
Columbus, Georgia • 31907-5645 • (706) 507-8800