

Please type or print the information requested. You are not required to respond to starred (*) items; this data is requested for statistical purposes only. We would appreciate your cooperation. All information will be computer-filed for use only at and by the University.

**Classified (Degree-Seeking)
Application for Graduate
School Admission**

Name

(Last/Family) (First/Given) (MI)

(Previous Name(s), if any) (Salutation)

Social Security No.

Mailing Address

(Number and Street) (Apartment or Box No., if any)

(City) (State) (Zip Code)

(Country, if not United States)

E-mail Address

Current Phone No.

_____ **Circle Type** (Home / Work / Cell / School)

Permanent Address

Check if same at mailing address

(Number and Street) (Apartment or Box No., if any)

(City) (State) (Zip Code)

(Country, if not United States)

Permanent Phone No.

_____ Check if no permanent phone number is available

Birthdate

(Month / Day / Year)

Birthplace

Gender

Male Female

***Marital Status** Single Married Other

Citizenship

USA Other _____

Check here if a Resident Immigrant (i.e., a "green card" holder)

Check here if a NON-Resident Immigrant and indicate type of visa held, if any: _____

***Your ethnicity**

Hispanic or Latino Not Hispanic or Latino

***Select one or more races to indicate what you consider yourself to be**

Alaskan Native American Indian Asian Black or African American

Caucasian Native Hawaiian Other Pacific Islander

***Religion**

Roman Catholic Mormon Other Christian Jewish Muslim

Hindu Buddhist None Other _____

***Legacy**

If a family member has earned a degree from Saint Louis University, please identify their relationship to you. If more than one applies, please select the closest relationship.

Parent Sibling Grandparent

Aunt/Uncle Cousin Other _____

This form continues on the back

Colleges, Universities attended

and/or currently attending

School / Location

From (mo/yr) To (mo/yr)

Major

Degree

Conferral Date

GPA

Seeking Admission for which academic term?

Check one box and enter year

Fall/First Semester

Spring/Second Semester

Summer Session

Year _____

Degree Sought

Proposed Major

Proposed Concentration (if any)

Are you a faculty member of Saint Louis University?

Yes No

Standardized Testing

Enter score and date taken

GRE General (mo/yr) _____ Verbal _____ Quantitative _____ Analytical _____ GRE Subject _____ (mo/yr) _____

GMAT (total) _____ (mo/yr) _____ Verbal _____ Quantitative _____ Analytical _____

LSAT _____ (mo/yr) _____ MAT _____ (mo/yr) _____ TOEFL _____ (mo/yr) _____

If you plan to attend as a full time student, would you like to be considered for the following? (Check all that apply)

Assistantship

Fellowship

Traineeship

How did you learn about Saint Louis University? (Check all that apply)

College Advisor

Career Fair

College Fair

Open House

Currently Attending SLU

SLU Alum

Live in or near St. Louis

Peterson's Guide

SLU Faculty or Staff

SLU Website

GradView.com

GradSchools.com

Other _____

Emergency Contact

(Last/Family)

(First/Given)

(Salutation)

Telephone No. () _____

(Relationship to Applicant)

Disclosure Statement

I, as the applicant, attest that the information provided above is, to the best of my knowledge, accurate and true. I understand that this application and any materials received in support of my application, including letters of reference, will be made available to and reviewed by representatives from this university. I understand that withholding pertinent information requested on this application or giving false information will make me ineligible for admission to the University or subject to cancellation of registration if admission is granted.

Mail completed application and references to:

Saint Louis University
Graduate School
3634 Lindell Blvd., Suite 117
St. Louis, MO 63108

Date

Signed

\$40 APPLICATION FEE MUST ACCOMPANY THIS APPLICATION
(\$20 fee for those re-applying to the Graduate School).
This fee is non-refundable and will not apply to tuition