Application for Graduate Studies Admission

BRYANT UNIVERSITY
College of Arts and Sciences
1150 Douglas Pike
Smithfield, Rhode Island 02917-1284

Personal Information

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Other name (for transcript purpose only) __________________________________________

Street Address ________________________________________________________________

City ____________________________ State ______ Zip ______ Country ____________

Home Telephone ( ___ ) ______________________  Cell Number ( ___ ) ________________

Email Address ________________________________________________________________

Gender ______ Date of Birth ___________________________ Place of Birth __________________

Social Security Number ___________________________ Ethnicity (optional) ________________

Are you a citizen of the US? _____ Yes _____ No

If you checked NO as a US citizen, specify your country of citizenship ____________________

If you are a citizen of another country, are you:

Permanent resident of the US? _____ Yes _____ No

If YES, alien registration number ________________________________

Holder of a non-resident Visa? _____ Yes _____ No

If YES, specify: _____ F1 _____ H1 _____ J1 _____ Other

Do you have any relatives who attended Bryant University? If YES, please specify:

Name ____________________________ Relationship ________________________________
**Previous Educational Experience**

Please list all colleges/universities you have attended regardless whether or not coursework was transferred and transfer credit granted by another college or university. **List the most recent college or university first.**

**Institution # 1**

<table>
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<tr>
<th>College/University</th>
<th>City/State</th>
<th>Degree</th>
<th>Name of Degree</th>
<th>Major</th>
<th>Minor</th>
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Month/Year Awarded Degree ____________  
Years Attended From ______  To ______

**Institution # 2**

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<th>College/University</th>
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<th>Name of Degree</th>
<th>Major</th>
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Month/Year Awarded Degree ____________  
Years Attended From ______  To ______

**Institution # 3**

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<th>College/University</th>
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<th>Degree</th>
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<th>Major</th>
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Month/Year Awarded Degree ____________  
Years Attended From ______  To ______

**Institution # 4**

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<tr>
<th>College/University</th>
<th>City/State</th>
<th>Degree</th>
<th>Name of Degree</th>
<th>Major</th>
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Month/Year Awarded Degree ____________  
Years Attended From ______  To ______
Employment Information
Current Employer ____________________________________________________________
Current Job Title ____________________________________________________________
Length of Employment in Current Position _____ (Check one) _____ Full-Time _____ Part-time
Employer Street Address _______________________________________________________
City _________________________ State ______ Zip _______ Country ________________
Work Phone (_____) ___________________ Email Address __________________________

Additional Mailing Information
Do you have a second address that will assure you receive correspondence? ____ Yes ____ No
Name _________________________________________________________________
Street Address ____________________________________________________________
City _________________________ State ______ Zip _______ Country ________________
Telephone number (_____) ____________________________
Start date of second address __________________________ End date of second address __________

Assessment Information
Have you taken the Graduate Record Examination (GRE)? ______ Yes ______ No
Have you taken the PRAXIS (MAT candidates only)? ______ Yes ______ No
(Only required if undergraduate GPA is below 3.0)
Have you taken the Test of English as a Foreign Language (TOEFL)? ______ Yes ______ No
(International Applicants only respond)
If YES to TOEFL, date taken: ________________________________________________
If NO to TOEFL, when do you plan to take the test? ____________________________

Enrollment Information
1. Are you a transfer student from another college or university? ______ Yes ______ No
2. Are you applying for re-admission after an absence? ______ Yes ______ No
3. If you answered YES to #2, indicate the date (MM/YY) you last attended Bryant University.
________________________________________
Program of Study (Check one of the following)

______ Master of Science (MS) Degree in Global Environmental Studies

Check the term you plan to begin your graduate study.

______ Summer
______ Fall
______ Spring

______ Master of Arts (MA) Degree in Communication

Check the term you plan to begin your graduate study.

______ Summer
______ Fall
______ Spring

______ Master of Arts in Teaching (MAT) Degree/Teacher Certification Secondary Education

Check the term you plan to begin your graduate study.

______ Summer
______ Fall
______ Spring

If applying for the MAT Degree, what subject area? ________________________________

Applicant Signature

Please enclose a check for the nonrefundable application fee. This application remains valid for one year from the student’s anticipated term of initial enrollment. If accepted, you must abide by the rules and regulations of Bryant University and pay all expenses incurred at Bryant University.

In consideration of the undertaking by Bryant University to process this application, the undersigned agrees that any information furnished to Bryant University, at any time and regardless of whether or not the candidate is accepted as a student at Bryant University, including all information and materials of any kind received by Bryant University from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the undersigned, except that an authorized official of Bryant University may, at his/her discretion, for official purposes, disclose all or any part thereof to such person or persons as she/he may deem advisable.

__________________________________________________________________________
Applicant’s Name

__________________________________________________________________________
Date

Printed Name

Nondiscrimination Policy

Bryant University admits students of any race, gender, sexual orientation, religion, color, national and ethnic origins to all rights and privileges, programs and activities generally afforded or made available to students at the school. It does not discriminate in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administered programs. In addition, Bryant University does not discriminate unlawfully against the disabled and is in full compliance with the Rehabilitation Act of 1973, as amended.

Inquiries/complaints with regard to disabled student issues should be addressed to the Director of Health Services, Bryant University, Smithfield, RI 02917 (401-232-6220), who has been designated by Bryant University to coordinate the institution’s efforts to comply with the regulations implementing Section 504. Persons may also contact the Director, US Department of Education, Office of Civil Rights, Region One, Boston, MA 02109, regarding the University’s compliance with regulations.