



Application for Graduate Admission

Lincoln University, Office of Graduate Studies
116A Stamper Hall, 824 Chestnut Street, Jefferson City, MO 65101
Telephone: (573) 681-5247, Fax: (573) 681-5106
Email: gradschool@lincolnu.edu

Name: _____
Last First MI Maiden/Other

Address: _____
Street (include apartment number if applies) City

State Zip Code County Country

Length of time at above address? _____

If less than one (1) year, please give former address _____

Phone(s): _____ / _____ / _____
Home Work Cell

Social Security Number: _____ Birth Date: _____

Are you of Hispanic/Latino/Spanish Origin? Yes No

Select one or more races from the following five racial groups: American Indian/ Alaskan Native White Asian
 Black or African American Native Hawaiian or Other Pacific Islander

Gender (check): Female Male

E- mail(s): _____

I wish to apply for Term/Semester: _____ Year: _____
(Fall/ Spring/ Summer)

I wish to apply for (check appropriate degree program A N D if applicable concentration/ emphasis):

- MA Higher Education (HBCU)
- MA History
- MA Sociology
- MA Sociology/ Criminal Justice
- MBA Business Administration
 - Accounting
 - Management
 - Management Information System
 - Public Administration and Policy
- M S Environmental Science
- MS Integrated Agricultural Systems
- MS Natural Science
- MED School Teaching
 - Elementary (Certified Teachers)
 - Middle School (Non Certified Teachers)
 - Secondary (Certified/ Non Certified Teachers)
- Teaching Certification only
- MED Guidance and Counseling Elementary
 - Secondary
 - Community/ Agency
- Graduate Certificate
 - College Student Mental Health
 - Instructional Technology
- Non-Degree Seeking

Have you applied to graduate studies at LU before (check)? Yes No

Were you admitted (check)? Yes No

I plan to enroll (check): Full-time Part-time

Are you a United States Citizen (check)? Yes No

OR

Are you a Resident Alien living in the United States (check)? Will Yes No

Will you be an international student in the United States (check)? Yes No

If yes, please provide Affidavit of Support & supporting documentation or visa type and expiration date.

Do you plan to live on campus (check)? Yes No

If Yes, please contact Student and Residential Life (573) -681-5478 for further information.

Education-Please list all colleges/ universities attended, including professional schools. If you are a LU graduate, please indicate. Official transcripts must be sent directly to the Graduate Studies office from your college/ university.

Name/ Address	Dates Attended	Major	Degree Received/ Expected Date of Graduation	GPA
---------------	----------------	-------	--	-----

Recommendations-ask three persons who know your academic qualifications to write recommendations on your behalf, using the forms enclosed. If you graduated within one year, please ask at least two professors from your major to write recommendations.

Name	Address / Phone #	Position
------	-------------------	----------

***** ** ***** ** ***** ** ***** ** ***** ** ***** ** ***** ** ***** ** *****

I attest to the fact that all information given on this application is complete and correct and any omission or falsification could result in denial of admission or immediate dismissal.

Signature

Date

Deadline: All application materials must be received in the Graduate Studies office at least 30 days prior to the semester in which the student plans to enroll.

How did you learn about our Graduate Program? (Check all that apply)

What influenced you to apply? (Check all that apply)

- Lincoln University Website
- Newspaper A d
- Radio A d
- Billboard Display
- Friend/ Family or Colleague
- Commercial A d

Other _____

- Cost
- Location
- Degrees Offered
- Course Scheduling
- Accreditation
- Current Student or Alumni
- Other _____

Title IX Coordinator

In accordance with Title IX implementing regulations at 34 C.F.R. § 106.8(a); Lincoln University has designated one employee to coordinate its efforts to comply with and carry out its responsibilities under Title IX. The coordinator's responsibilities include investigating complaints communicated to the recipient alleging noncompliance with Title IX. Section 106.8(a) also requires Lincoln University to notify all students and employees of the name, address, and telephone number of the designated coordinator. Lincoln University Title IX Coordinator contact information is as follows:

Jim Marcantonio
Human Resource Director
101 Young Hall
820 Chestnut Street
Jefferson City, Missouri 65102-0029
Phone: 573 681-5019
Fax: 573 681-5787

Non Discrimination Notice

In accordance with Title IX regulations at 34 C.F.R. § 106.9; Lincoln University does not discriminate on the basis of sex in the education programs or activities it operates. Lincoln University does not discriminate on the basis of sex in admission to or employment in its education programs or activities. Inquiries to recipients concerning the application of Title IX and its implementing regulations may be referred to the Title IX coordinator or to OCR.

Title IX Coordinator- Jim Marcantonio
Human Resource Director
101 Young Hall
820 Chestnut Street
Jefferson City, Missouri 65102 -0029
Phone: 573 681-5019
Fax: 573 681-5787

Office for Civil Rights
Kansas City
U.S. Department of Education
8930 Ward Parkway
Suite 2037
Kansas City, MO 64114
Tel.: (816) 268-0550
Fax: (816) 823-1404