

STATEMENT OF PURPOSE

Lincoln University
School of Graduate Studies
820 Chestnut Street, Jefferson City, MO 65101
(573) 681-5247 Fax (573) 681-5106

Since more than scholastic aptitude alone is involved in admission to the Graduate School, it will be most helpful if you write about yourself (not more than one typed page). Please include what you would consider your special qualification to be over and above those called for on the previous pages of the application; what problems you feel you have to face as a graduate student; your experience outside the classroom and what it has meant to you, what you propose to do with your advanced degree, professionally, and for society at large; in short, speak as your own best advocate.

I hereby certify that the information given by me on this application is complete and accurate. I understand that any misrepresentation may be cause for denying admission or permission to register at any time.

Name of Applicant: _____
Last First M.I.

Name of Graduate Program Being Sought: _____

Applicant's Signature: _____ Date: _____