

LEWIS UNIVERSITY

APPLICATION

for Graduate Admission

Graduate applicants for admission must complete the application **fully** and return it to the Office of Graduate and Adult Admission along with a \$40 application fee (check or money order payable to Lewis University).

Office of Graduate and Adult Admission

grad@lewisu.edu • www.lewisu.edu

Unit 1213 • One University Parkway • Romeoville, Illinois 60446-2200
(815) 836-5610 • toll-free (800) 897-9000 • fax (815) 836-5578

LEWIS

APPLICATION FOR GRADUATE ADMISSION

Admission Statement

Graduate programs at Lewis University offer the prospective graduate student the opportunity to enhance his/her undergraduate degree by completing a career-focused graduate program. It is expected that a candidate for admission to graduate study at the University was academically successful at the undergraduate level and is now ready to move on to a successful graduate-level experience. The University offers admission to the most qualified applicants to each program. Students are reviewed on the basis of profile material required for admission consideration. Admission is offered to the student whose profile most closely reflects the ability to succeed and the ability to contribute to, as well as learn from, the team-focused experience. Space in each program is limited. Admission criteria and requirements are subject to change.

Notice of Decision

Once we receive the appropriate documentation required for your degree program as listed above, we will send you notification by mail. If you have any questions, please contact us at grad@lewisu.edu or (815) 836-5610. Lewis University does not discriminate against any applicant because of race, color, religion, gender, national origin, age or disability.

Instructions for Completing this Application

1. Complete the application form accurately and honestly.
2. Forward official transcripts from all post-secondary institutions in which you were enrolled. Transcripts must be sent directly from each institution.
3. Some programs require a personal statement. Refer to the graduate checklist or refer to specific graduate program as to the requirements, content and length.
4. Attach a \$40 non-refundable application fee to the completed application made payable to Lewis University. The application fee is waived for Lewis alumni.
5. Submit letters of recommendation. Departments may have program specific forms. Please refer to your graduate program.
6. Some programs have specific admission requirements. Please refer to the graduate checklist or the Lewis Web site at www.lewisu.edu for specific information.

Biographical Information

FULL LEGAL NAME: LAST, FIRST, MIDDLE OR INITIAL _____

MAIDEN NAME _____ PREFERRED FIRST NAME _____

PERMANENT ADDRESS: CITY, STATE, ZIP _____ COUNTY _____

PERMANENT TELEPHONE NUMBER WITH AREA CODE _____

CELL PHONE NUMBER WITH AREA CODE _____

E-MAIL ADDRESS _____

SOCIAL SECURITY NUMBER _____

BIRTH DATE _____ BIRTH PLACE (CITY/STATE) _____

GENDER: MALE FEMALE

MARITAL STATUS: SINGLE MARRIED

If you are not a U.S. citizen, please complete the following:

PERMANENT RESIDENT IN THE U.S. IMMIGRANT

ALIEN REGISTRATION NUMBER _____ COUNTRY OF PERMANENT RESIDENCE _____

To satisfy federal government requirements, please indicate ethnicity, race and religious information:

ETHNICITY:

HISPANIC OR LATINO NOT HISPANIC OR LATINO

RACE (SELECT ONE OR MORE):

AMERICAN INDIAN OR ALASKAN NATIVE ASIAN

BLACK OR AFRICAN AMERICAN NATIVE HAWAIIAN OR PACIFIC ISLANDER

WHITE

RELIGIOUS PREFERENCE _____

Military Experience

Are you a veteran of the U.S. Armed Forces? YES NO

IF YES, WHICH MILITARY BRANCH? _____

Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training? YES NO

Employment Information

EMPLOYER _____

EMPLOYER ADDRESS _____ CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____ JOB TITLE _____

EMPLOYMENT TELEPHONE NUMBER WITH AREA CODE _____ EMPLOYMENT FAX WITH AREA CODE _____

PLEASE INDICATE THE BEST PLACE AND TIME TO CONTACT YOU

Do you receive tuition reimbursement? YES NO

Undergraduate Degree Information

NAME OF INSTITUTION _____ CITY/STATE _____ MONTH/YEAR OF DEGREE AWARDED _____

UNDERGRADUATE DEGREE _____ MAJOR _____ MINOR _____ GPA _____

Education Background. Include all undergraduate and graduate institutions attended. Official transcripts bearing the signature of the registrar and the institutional seal must be issued by each institution or delivered in a sealed envelope.

NAME OF INSTITUTION	LOCATION	DATES OF ATTENDANCE	DEGREE AND DATE	MAJOR	GPA
NAME OF INSTITUTION	LOCATION	DATES OF ATTENDANCE	DEGREE AND DATE	MAJOR	GPA

Standardized Test Information. Not all graduate programs require standardized tests. Refer to the graduate checklist for specific admission requirements.

NAME OF TEST (GMAT, GRE, MAT, ILLINOIS BASIC SKILLS TEST, ETC.) _____ DATE TAKEN _____ SCORE _____

FOR INTERNATIONAL STUDENTS ONLY: TEST OF ENGLISH AS A FOREIGN LANGUAGE _____ DATE TOEFL TAKEN _____ TOEFL SCORE _____

Did you send your scores to Lewis University? YES NO

Have you previously attended Lewis University? YES NO

Please note: if you have previously attended Lewis University, your signature at the end of the application gives the Office of Graduate and Adult Admission permission to request a copy of your Lewis University permanent record from the Office of the Registrar.

WHAT INFLUENCED YOU TO APPLY TO LEWIS UNIVERSITY? _____

Self-Disclosure

Have you been convicted of a felony? YES NO

College of Education applicants:

Have you ever had a teaching certificate suspended or revoked? YES NO

Is revocation or suspension of a teaching certificate pending? YES NO

College of Nursing and Health Professions applicants:

Have you ever had a nursing license suspended or revoked? YES NO

Is revocation or suspension of a nursing license pending? YES NO

Class Location Preference

Term Preference

- ROMEOVILLE (MAIN CAMPUS)
 - CHICAGO
 - HICKORY HILLS
 - OAK BROOK
 - SHOREWOOD
 - TINLEY PARK
 - ALBUQUERQUE
 - OTHER/COHORT _____
- FALL
 - SPRING
 - SUMMER

I certify that the information on this application is correct to the best of my knowledge.

I understand that failure to answer any question on this form truthfully, fully, and accurately may make me ineligible for admission to Lewis University or may result in my dismissal from the University.

SIGNATURE OF APPLICANT _____ DATE _____

Graduate Programs

Graduate Programs

COLLEGE OF ARTS AND SCIENCES

- Aviation and Transportation (M.S.)** Online only
- Counseling Psychology (M.A.)**
Select one concentration:
 - Child and Adolescent Counseling
 - Mental Health Counseling
- Criminal/Social Justice (M.S.)**
- Organizational Leadership (M.A.)**
I am interested in taking classes: On Campus Online
Select one concentration:
 - Organizational Management
 - Higher Education/Student Services
 - Not-for-Profit Management
 - Public Administration
 - Training and Development
- Public Safety Administration (M.S.)**
I am interested in taking classes: On Campus Online
- School Counseling (M.A.)**

COLLEGE OF ARTS AND SCIENCES/ COLLEGE OF BUSINESS

- Information Security (M.S.)**
I am interested in taking classes: On Campus Online
Select one concentration:
 - Managerial
 - Technical

COLLEGE OF BUSINESS

- Business Administration (MBA)**
Select one concentration:

<input type="checkbox"/> Accountancy	<input type="checkbox"/> Information Technology Management
<input type="checkbox"/> Finance	<input type="checkbox"/> International Business
<input type="checkbox"/> Healthcare Management	<input type="checkbox"/> Marketing
<input type="checkbox"/> Human Resource Mgmt.	<input type="checkbox"/> Project Management
<input type="checkbox"/> Information Security	<input type="checkbox"/> Operations Management
<input type="checkbox"/> Custom Elective Option	
- Finance (M.S.)**
- Management (M.S.)**
- Graduate Certificate**

COLLEGE OF NURSING AND HEALTH PROFESSIONS

- State(s) where licensed as an RN:* _____
- Nursing (M.S.N.)** *Select one:*
 - Nursing Administration
 - Nursing Education
 - Adult Nurse Practitioner
 - Family Nurse Practitioner
 - M.S.N./MBA joint degree (Nursing Administration only)
 - Doctor of Nursing Practice (DNP)** anticipated 2012

COLLEGE OF EDUCATION

DEPARTMENT OF EDUCATIONAL LEADERSHIP

- Curriculum and Instruction: Teacher Leadership (M.Ed.)**
- Educational Leadership (M.A., M.Ed.)**
- English as a Second Language (ESL) Endorsement with M.Ed. Option**
- C.A.S. General Administrative Endorsement**
- Educational Leadership for Teaching and Learning (Ed.D.)**
- Ed.D. with Superintendent Endorsement**

DEPARTMENT OF ELEMENTARY EDUCATION

- Field-Based Elementary Certification Program (M.A.)**
- Elementary Certification Program for Teachers who hold a Bilingual (Type 29) Certificate (M.A.)**
- Evening Program for Elementary Certification (M.A.)**
- Early Childhood Education (Anticipated 2012) (M.A.)**

DEPARTMENT OF READING AND LITERACY

- Reading and Literacy, Reading Specialist (M.A.)**
- Curriculum and Instruction: Reading Teacher Endorsement (M.Ed.)**
- Curriculum and Instruction: Literacy and English Language Learning with Reading Teacher and ESL Endorsements (M.Ed.)**
- Reading Teacher Endorsement without a degree**

DEPARTMENT OF SECONDARY EDUCATION/TECHNOLOGY

- Secondary Education (M.A.)**
- Curriculum and Instruction: Instructional Technology (M.Ed.)**
- Middle School Endorsement without a degree**

DEPARTMENT OF SPECIAL EDUCATION

- Special Education (M.A.)**
- LBSI Endorsement without a degree**

