

PLEASE PRINT OR TYPE CLEARLY

Date _____

Name: Mr. Mrs. Ms. _____
Family/Surname Given/ First Name Middle Name

Marital Status: Single Married Separate Divorced Preferred Name _____

Date of Birth (mm/dd/yy) ____/ ____/ ____ Place of Birth (city/state/country) _____

Language(s) spoken at Home: _____ Gender Male Female

OPTIONAL PERSONAL DATA FOR U.S. CITIZENS

Ethnicity: American Indian or Alaskan Native Asian or Pacific Island Hispanic
 Black- Non Hispanic Caucasian Other (please specify)

Citizenship (please check only one): Country of Citizenship _____

U.S. Citizen Social Security Number ____ - ____ - ____ U.S. Permanent Resident
(please attach copies of card's both sides)

Non U.S. Citizen/ Current Visa Status _____ Alien Number ____ - ____ - ____

Refugee

CURRENT MAILING ADDRESS

Street/Address/ P.O. Box _____

District/ Province _____ City _____

State _____ Zip Code _____ Country _____

Telephones: Day _____ Evening _____ Mobile _____

Effective Dates From (mm/dd/yy) ____/ ____/ ____ To (mm/dd/yy) ____/ ____/ ____

Note: All applicants must list their permanent home address if different from their current mailing address.

PERMANENT ADDRESS

Street/Address/ P.O. Box _____

District/ Province _____ City _____

State _____ Zip Code _____ Country _____

Telephones: Day _____ Evening _____ Mobile _____

E-mail Address: Home Work Campus Personal _____

Name(s) of Planned Program: _____ Name(s) of Planned Concentration(s): _____

Student Number (if previously attended Keiser University) _____ How, where or from whom did you hear about Keiser University? _____

Note: One copy of your official transcripts/academic records at all higher educational institutions enrolled, except Keiser University, is required and must be remitted to:

KEISER UNIVERSITY
Graduate School
1900 West Commercial Blvd.
Fort Lauderdale, Florida 33309
(954) 318-1620 / (888) 7KEISER (753-4737)

Keiser University is an equal opportunity/affirmative action educational institution.

Please list all colleges/ universities you are currently attending or in which you have been enrolled:

Institution City/State	Field of Study	Dates	Degree(s) Earned	GPA
		_____ to _____		
		_____ to _____		
		_____ to _____		

PROFESSIONAL OR WORK EXPERIENCE

Dates	Employer	Location	Title/ Position(s)
_____ to _____			
_____ to _____			
_____ to _____			

Academic Honor, prizes or scholarships you have received or honor societies to which you have been elected:

Professional organizations in which you currently hold membership(s):

Title or description of any thesis, research report, patent or other publications (use separate sheet, if necessary):

Letters of recommendation and the enclosed reference form from two instructors or employers, who can speak authoritatively regarding your aptitude and preparation for graduate study, are required. Please list below the names of the individuals from whom you have requested recommendations. If you are a current student at Keiser University, please list two faculty members, who know you and can evaluate your academic work:

1. _____ 2. _____

Please describe your background (e.g. , coursework, professional and research experience, etc.) as it pertains to your area(s) of interest at Keiser University:

I certify that the statements made in this application are true to the best of my knowledge. If admitted, I agree to abide by the rules and regulations of Keiser University.

Signature of Applicant

____/____/____
Date