

GRADUATE OR POSTBACCALAUREATE ADMISSION APPLICATION

Office of Admissions / 1250 Siskiyou Boulevard / Ashland, Oregon 97520
541-552-6411 / sou.edu/admissions

\$50 NONREFUNDABLE APPLICATION FEE

For your application to be processed, this application form must be completed in its entirety.

1. APPLICANT INFORMATION

Fill in year and term you plan to enter SOU: Fall Winter Spring Summer Year _____

Will you be taking prerequisite coursework to enter a master's program? Yes No

If yes, what term do you plan to begin your prerequisite work? Fall Winter Spring Summer Year _____

Last Name First Name Middle Name Suffix (Jr, Sr, etc.)

Former name(s) that may have appeared on your academic records _____

Birth Date _____ Student Identification Number (if previously attended SOU) _____ Male Female

Social Security Number _____ (Required for IRS reporting purposes as explained on page 4.)*

Address _____
PO Box/Street Address City State Zip

Phone (_____) _____ Email _____

Citizenship: U.S. Citizen Other Citizenship _____
Country Visa Type Date Issued

Ethnic/Racial identity: Please indicate your ethnic identity by checking one of the ethnic groups below. *Note:* In compliance with federal reporting requirements, OUS colleges and universities must seek to identify the ethnic background of applicants for admission. You are encouraged to supply this information but may decline without in any way prejudicing your application.

- | | |
|---|--|
| <input type="checkbox"/> A Asian American (specify ethnic group) _____ | <input type="checkbox"/> N North African (please specify) _____ |
| <input type="checkbox"/> B Black, African American, non-Hispanic | <input type="checkbox"/> P Pacific Islander (specify ethnic group) _____ |
| <input type="checkbox"/> H Hispanic American (specify ethnic group) _____ | <input type="checkbox"/> W White, European American, non-Hispanic |
| <input type="checkbox"/> I American Indian or Alaskan Native (specify tribal affiliation) _____ | <input type="checkbox"/> X Multi Ethnic (please specify) _____ |
| <input type="checkbox"/> M Middle Eastern (please specify) _____ | <input type="checkbox"/> O Other (please specify) _____ |
| | <input type="checkbox"/> D Decline to respond |

Contact Information: In case of emergency, the University may contact: Parent(s) Guardian(s) Other (Please specify relationship) _____

Last Name First Name Middle Name

Address _____
PO Box/Street Address City State Zip

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Email _____

2. APPLICATION HISTORY

UNDERGRADUATE

- I have NOT attended Southern Oregon University as an undergraduate.
- I have attended Southern Oregon University as an undergraduate but did NOT graduate. Years attended: _____
- I have attended Southern Oregon University as an undergraduate and have/will graduate(d). Major and Graduation Year: _____

GRADUATE/POSTBACCALAUREATE

- This is my first application for graduate or postbaccalaureate study at Southern Oregon University.
- I have applied previously and was NOT admitted.
- I have applied and was admitted but did NOT enroll. Program, Term, and Year: _____
- I have applied and was admitted and enrolled. Program, Term, and Year: _____

3. DEGREE PROGRAM

When applying to one of the following programs, please confirm requirements. Note that all programs have different application deadlines, program applications, and program requirements. Contact the program coordinator for specific program information.

School of Education (www.sou.edu/education)

Master's of Arts in Teaching (MAT): 541-552-6936

Early Childhood and Elementary Elementary and Middle School Middle School and High School

Endorsement Area: _____

Master's of Arts or Science in Education (Med): 541-552-6996

Elementary Education Option: _____ Secondary Education Endorsement Area: _____

Continuing Teaching License Initial Administrator License Continuing Administrator License

ESOL READ Other: _____

Special Education (SPED): 541-552-6936

Stand-Alone Program: Initial License Dual Program Added Endorsement

School of Business (www.sou.edu/business)

Masters in Business Administration (MBA): Donna Lane 541-552-8203

Masters in Management (MIM): Hart Wilson 541-552-8283

Postbaccalaureate Certificate in Accounting (PBAcc): Al Case 541-552-6556

Postbaccalaureate Certificate in Applied Finance and Economics (CAFE): Milan (Kip) Sigetich 541-552-6557

Postbaccalaureate Certificate in Business Information Systems (CBIS): Al Case 541-552-6556

Postbaccalaureate Certificate in Interactive Marketing and E-Commerce (CIMEC): Charles Jaeger 541-552-6714

Postbaccalaureate Certificate in International Business (IBS): Donna Lane 541-552-8203

Postbaccalaureate Certificate in Management of Aging Services: John Bowling 541-552-8116

Postbaccalaureate Certificate in Management of Human Resources (CMHR): Joan McBee 541-552-6493

Postbaccalaureate Certificate in Nonprofit Management (CNM): John Laughlin 541-552-6718

Postbaccalaureate Certificate in Sustainability Leadership: Steven Schein 541-552-6708

College of Arts and Sciences (www.sou.edu/cas)

Master's in Mental Health Counseling (MHC): Lori Courtney 541-552-6947

Master's of Music, Conducting (ABC): Lois DeBruno 541-552-6333

Master's of Language (SLI): Foreign Languages and Literatures 541-552-6435

Master's of Theatre Studies in Production and Design: Theatre 541-552-6346

Master's of Environmental Education (EE): Colleen Martin-Low 541-552-6808

Masters of Mathematics and Computer Science (MACS): Barbara Cantrell 541-552-6520 or Steve Jessup 541-552-6804

Master's in Interdisciplinary Studies (MIIS): Barbara Cantrell 541-552-6520 or Steve Jessup 541-552-6804

Major Concentration: _____

Postbaccalaureate Certificate in Botany: Steve Jessup 541-552-6804

Additional Undergraduate Coursework

Taking prerequisite undergraduate coursework toward the master's degree program indicated above

Second baccalaureate degree: Major: _____

Taking additional undergraduate coursework only: Subject area: _____

4. EDUCATION

Please list every community college, junior college, college, and university you have attended or are currently attending. Omitting a prior college or university from this list may result in denial of admission. It is your responsibility to request that official transcripts be sent directly to the SOU Admissions Office from all the institutions listed. Admissions will not be complete until all official transcripts are received.

Institution/Location	Dates Attended	Degree/Credits	Left in Good Standing?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

5. TESTING INFORMATION

If you are applying to one of the following degree programs, you must take the Graduate Record Examination (GRE). In addition to self-reporting your test results below, you are required to have official GRE scores sent to the SOU Admissions Office:

Master's in Mental Health Counseling (MHC)

Master's of Environmental Education (EE)

GRE Score: _____ Testing Date: _____

Other degree programs may require additional testing. Contact the department regarding additional program-specific requirements.

6. TUITION CLASSIFICATION FOR ENROLLMENT (Failure to complete this entire section will result in nonresident classification.)

Are you claiming tuition classification as an Oregon resident? Yes (complete the following section) No (go to section 7)

Are you entirely self-supporting? Yes No If no, what percentage is supplied by parent/guardian? _____%

Student

**Mother/Father/Guardian
(Complete if you are under 24)**

Most recent continuous presence in Oregon: From _____ To _____
MONTH/YEAR MONTH/YEAR

From _____ To _____
MONTH/YEAR MONTH/YEAR

Date Oregon driver's license/ID was issued: _____
YEAR

_____ YEAR

Are you in the military? Yes No

Yes No

Did you enter military service from Oregon? Yes No

Yes No

Dates of military service from Oregon: From _____ To _____
MONTH/YEAR MONTH/YEAR

From _____ To _____
MONTH/YEAR MONTH/YEAR

Last two years Oregon income taxes have been filed: _____
YEAR YEAR

_____ YEAR YEAR

Are you a member of a Native American Indian tribe recognized with an affiliation to the state of Oregon? Yes No

If yes, please specify: _____

Oregon employment information (if applicable):

Parent

(1) _____ EMPLOYER _____ CITY/STATE From _____ To _____
MONTH/YEAR MONTH/YEAR

(2) _____ EMPLOYER _____ CITY/STATE From _____ To _____
MONTH/YEAR MONTH/YEAR

Student

(1) _____ EMPLOYER _____ CITY/STATE From _____ To _____
MONTH/YEAR MONTH/YEAR

(2) _____ EMPLOYER _____ CITY/STATE From _____ To _____
MONTH/YEAR MONTH/YEAR

7. CERTIFICATION

I certify that I have answered all of the questions on this application and that all statements are complete and true. I understand that if I am admitted and do not enroll for the term to which I am admitted, I will need to reapply for admission. I have also read and understand the social security number disclosure statement.*

PLEASE SIGN HERE _____
APPLICANT'S SIGNATURE DATE

***Oregon University System (OUS) Social Security Number Disclosure and Consent Statement**

To comply with the Tax Payer Relief Act of 1997, Southern Oregon University must obtain your correct Social Security number (SSN) to file returns with the Internal Revenue Service (IRS) and to furnish a statement to you. The returns filed by SOU must contain information about qualified tuition and related expenses. The Privacy Act of 1974, section 6109 of the Internal Revenue Code, requires that you give your correct SSN to agencies who must file information returns with the IRS. The IRS uses your SSN for identification and to verify the accuracy of your tax return. For more information, please refer to Internal Revenue Code section 6050S.

Please note that while your SSN is not required at the time of your application for admission, you will not be able to enroll in classes if it has not been furnished at that time.

In addition, by signing this application, you authorize SOU and OUS to use your SSN for tracking and statistical purposes as outlined in the OUS Disclosure and Consent Statement printed in the Campus Handbook and available on the Web at www.sou.edu/registrar/confident.htm.

I understand that I will be assigned a randomly generated SOU student identification number upon applying for admission. This number is designed to help protect my identity privacy, and it will be used in lieu of my Social Security number for University business.

Southern Oregon University is committed to providing equal opportunity in its recruitment, admissions, educational programs, activities, and employment without discrimination on the basis of age, disability, national origin, race, color, marital status, religion, sex, or sexual orientation. Affirmative Action Officers: Dean of Students (Students): 541-552-6223; Associate Provost (Faculty): 541-552-6114; and Associate Vice President for Human Resources (Administrators and Classified Staff): 541-552-6511. Southern Oregon University, 1250 Siskiyou Blvd., Ashland, OR 97520. Campus Information: (541) 552 7672

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