



University of Saint Mary Online Processing Center  
4500 Cherry Creek Drive South Suite 350 Denver, CO 80246  
Website: <http://online.stmary.edu/>

**APPLICATION FOR GRADUATE ADMISSION**  
**Masters in Business Administration**

Successful completion of the following requirements is necessary for admission.

- Graduate application
- Submission of the following documents
  - Academic Honesty Agreement
- GPA of 2.75 (on 4.0 scale)
  - Lower GPAs may be considered at the discretion of the department and will require additional application pieces
- Official transcripts from all previous institutions
- Must have Bachelor's degree from a regionally accredited institution.
- International Applicants and Applicants Educated Outside the United States:
  - All coursework taken from a college/university outside of the U.S. must be evaluated by an organization specializing in foreign credential evaluation (e.g. Educational Credential Evaluators at [www.ece.org](http://www.ece.org) or World Education Services at [www.wes.org](http://www.wes.org)). USM must receive the transcript evaluation results and the official transcripts from the college/university
  - Submit Official Scores for the Test of English as a Foreign Language (TOEFL).
    - ✓ International students are required to submit official TOEFL. The code for the university is 6630. Photocopies of score reports will not be accepted.
    - ✓ More information about this test can be found at [www.toefl.org](http://www.toefl.org).
    - ✓ International Students are required to submit a completed financial declaration form. International transcripts must be evaluated by a transcript evaluation service. We recommend WES ([www.wes.org](http://www.wes.org)) or ECE ([www.ece.org](http://www.ece.org)).

### ***Transfer Credit***

Upon approval, you may transfer up to nine credit hours of comparable coursework from another graduate or professional degree program. Credit hours for MGT 795 Business Policy and Ethics, which is the program's capstone course, may not be transferred into the program. Requests for transfer credit are subject to the requirements described in the graduate division academic policies.

### **Tuition and Fees**

Tuition and fees are based on the current catalog available online at [www.stmary.edu](http://www.stmary.edu). Tuition and fees are subject to change.

## APPLICANT INFORMATION

### Section 1: Personal

Items marked with an \* are required.

Name:    Last\*                      First\*                      Middle

Preferred Name:

Maiden:

Date of Birth (mm/dd/yyyy):\*

Citizenship:

Permanent Address Line 1: \*

Permanent Address Line 2:

Permanent City: \*

Permanent Country (if outside United States):

Permanent State:\*

KS Residents Only –

Permanent Zip Code:\*

Permanent Phone Number:\*                      (Format: 123-456-7890)

Mobile/cell phone:                      (Format: 123-456-7890)

Email address:\*                      (format: abc@123.com)

Gender:         Male     Female

Social Security Number:

Religious Affiliation:

Ethnicity:         Hispanic/Latino     Not Hispanic/Latino

Race:             American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Is your father/mother an alumnus of our school? \*  Yes  No

Is your father/mother an employee of our school? \*  Yes  No

Marital Status:  Divorced  Married  Separated  Single  Unknown  Widowed

Have you ever been convicted of a felony? \*  Yes  No

If so, please explain the circumstances of your felony conviction:

List employers, most recent first, and positions relevant to the degree sought.

| Employer | Address | Position | From (mm/yyyy) |  | To (mm/yyyy) |  |
|----------|---------|----------|----------------|--|--------------|--|
|          |         |          |                |  |              |  |
|          |         |          |                |  |              |  |
|          |         |          |                |  |              |  |
|          |         |          |                |  |              |  |
|          |         |          |                |  |              |  |
|          |         |          |                |  |              |  |

### **Section 2: Enrollment**

Anticipated Date of Entrance: (mm/yyyy)

Enrollment Status:  Full Time  Part Time

Have you previously applied to USM?  Yes  No

Were you previously enrolled at USM?  Yes  No

How did you hear about USM? SCLHS referral-SCL affiliated hospital

If referred by current student, please name student

Will you be requesting Financial Aid?  Yes  No

Are you receiving Veteran's benefits?  Yes  No

What is the highest degree you've earned?  Associate's  RN Diploma  Bachelor's  
 Master's  Doctorate  Other

**Section 3: Military Information** (Please skip if not applicable)

Military Status:  Veteran  Non-Veteran

Military Branch:

Military Service Dates:

If Active Duty, will you be using Tuition Assistance?  Yes  No

If a Veteran, will you be using VA education or vocational rehabilitation benefits? Check Below:

- CH30 Montgomery GI Bill
- CH31 Vocational Rehabilitation and Employment Services
- CH32 Post-Vietnam Veterans' Educational Assistance Program
- CH33 Post 9-11 GI Bill
- CH33 Post 9-11 GI Bill Transfer of Eligibility
- CH35 Dependant's Education Assistance Program
- CH1606 Montgomery GI Bill – Selected Reserve
- CH1607 Reserve Education Assistance Program
- Other:

**Section 4: Academic History**

List in chronological order all colleges, professional schools and credit-granting courses you have attended. ***Please provide official transcripts for all institutions attended.*** If a degree is pending, indicate the date on which the degree will be awarded.

| Name of school | city, state and zip | from (mm/yyyy) |  | to (mm/yyyy) |  | degree | date (mm/yyyy) |  | GPA |
|----------------|---------------------|----------------|--|--------------|--|--------|----------------|--|-----|
|                |                     |                |  |              |  |        |                |  |     |
|                |                     |                |  |              |  |        |                |  |     |
|                |                     |                |  |              |  |        |                |  |     |
|                |                     |                |  |              |  |        |                |  |     |
|                |                     |                |  |              |  |        |                |  |     |
|                |                     |                |  |              |  |        |                |  |     |

TOEFL (if applicable) Date taken: (mm/dd/yyyy) Score:

What other schools did you consider for your studies?

Institution State

Institution State

Institution State

**Certification:** I understand that withholding information on this application or giving false information may make me ineligible for admission to the University of Saint Mary or subject to dismissal. I have read this application and certify that the statements I have made are correct and complete.

Checking this box and typing my name below will serve as my electronic signature.

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**Student's Signature**

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**Date**