



**APPLICATION FOR GRADUATE STUDY**

**EXPECTED REGISTRATION YEAR:** \_\_\_\_\_

**GRADUATE PROGRAM:** M.ED. MASTER OF EDUCATION

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Name: \_\_\_\_\_ Maiden: \_\_\_\_\_

Address: \_\_\_\_\_

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City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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Are you a U.S. Citizen?  Yes  No Nation of Citizenship: \_\_\_\_\_

If no:  Green Card  Degree Seeking  Student Exchange/Scholar

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Legal Name (as will appear on diploma): \_\_\_\_\_

Social Security: - - - Date of Birth: / /

*(I am voluntarily providing my social security # on this form with the understanding it will be used only for this institution's record keeping and data processing operations and for official enrollment reporting A Student Identification (ID) Number will be assigned. The applicant must retain the ID Number for college purposes.)*

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Home Telephone Number : ( ) - Cell : ( ) -

E-mail: \_\_\_\_\_

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Current Employer: \_\_\_\_\_ Telephone Number : ( ) -

**M.Ed. applicants only:** Current teaching license:  Yes  No

Date: \_\_\_\_\_ Field & Level \_\_\_\_\_ Cert.# \_\_\_\_\_

Date: \_\_\_\_\_ Field & Level \_\_\_\_\_ Cert.# \_\_\_\_\_

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Have you ever been convicted of a felony?  Yes  No

If yes, please explain: \_\_\_\_\_

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Are you eligible for VA benefits?  Yes  No

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To be considered for a graduate program at MHU, test scores directly from the testing facility of the Graduate Record Exam (GRE), or the Miller Analogy Test (MAT) or PRAXIS II test scores from ETS will be required and be directly mailed to: Mars Hill University, Adult and Graduate Studies, P. O. Box 6682, Mars Hill, NC 28754.

Have you taken the GRE?  Yes  No MAT?  Yes  No PRAXIS II?  Yes  No

If no, when is a possible date?

1. Please list the college or university attended and the degree(s) obtained from each: (An official transcript will have to be requested by the applicant from each school attended which you list below. Transcripts are to be directly mailed from the institution in a sealed envelope to: Mars Hill University, Adult and Graduate Studies P. O. Box 6682, Mars Hill, NC 28754.

Undergraduate degree and college or university: \_\_\_\_\_ State: \_\_\_\_\_

Graduate degree and college or university: \_\_\_\_\_ State: \_\_\_\_\_

2. Two (2) recommendation forms are required. The forms must be from professional educators who are familiar with your teaching skills and mailed in a sealed envelope directly to: Mars Hill University, Adult and Graduate Studies P. O. Box 6682, Mars Hill, NC 28754.

3. Please provide a resume.

4. Please respond to the essay questions provided.

5. Please note the following information is strictly voluntary and is **not** used in consideration for acceptance into Graduate Study Programs at Mars Hill University:

Ethnicity: \_\_\_ Hispanic or Latino or \_\_\_ Not Hispanic or Latino

Race (please check those that apply):

\_\_\_ Asian \_\_\_ African American/Black \_\_\_ White \_\_\_ Other

\_\_\_ Native American/Native Alaskan \_\_\_ Native Hawaiian or Other Pacific Islander

Gender: \_\_\_ Male \_\_\_ Female

6. How did you learn about Mars Hill University Graduate programs?

\_\_\_ Television \_\_\_ Employer \_\_\_ Friend \_\_\_\_\_

\_\_\_ Online Ad \_\_\_ Education Fair \_\_\_ Student Referral \_\_\_\_\_

\_\_\_ Newspaper \_\_\_ Radio \_\_\_ Website \_\_\_ Other \_\_\_\_\_

I hereby certify that all information given in this application is complete and accurate.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

A \$50 one-time, non-refundable application fee must accompany the completed application. This can be made in the form of cash, check, money order or credit card (Master Card or Visa only). Cash is accepted during normal business hours of 8:00 a.m. - 4:00 p.m. Make checks or money orders payable to Mars Hill University which can either be dropped off or mailed to Mars Hill University, Adult and Graduate Studies, P. O. Box 6682, Mars Hill, NC 28754. Credit card information can be made in person or by phone during business hours. Adult and Graduate Studies can be reached at 828-689-1166.

*Mars Hill University, like many colleges and universities across the United States, is very concerned about protecting our students, faculty, and staff in the event of an emergency or crisis, whether it is a man-made or natural disaster. The College has developed an emergency management team and policies to follow in the event of an emergency or crisis in our college community. "Contact Now" is the College's emergency notification system.*

**"CONTACT NOW" EMERGENCY INFORMATION**

My cell phone # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Relationship \_\_\_\_\_ Emergency Contact's Cell Phone # \_\_\_\_\_

*I understand that Mars Hill University will use my personal cell phone number and other information in conjunction with the campus emergency management system, "Contact Now." I understand that this information will be used exclusively for emergency and other priority notifications by the University. I understand that if I refuse to provide my contact information, I cannot be notified in case of an emergency or crisis on campus.*

I do not have a cell phone for use in notification of an emergency or crisis on campus.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Checklist: Please make sure all requirements are processed or mailed for application to be considered complete.**

- Application.
  - \$50 Application Fee (Non-refundable).
  - Statement of work experience (resume or C.V.).
  - Copy of teaching license (if applicable).
  - Responses to essay questions.
  - Official transcripts from all colleges or universities attended (*mailed directly*).
  - GRE or MAT or Praxis II scores (*mailed directly*).
  - Two recommendation forms (*mailed directly*).
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COMPLETED APPLICATION AND FEE SHOULD BE MAILED TO:

Mars Hill University  
Adult and Graduate Studies  
P.O. Box 6682  
Mars Hill, NC 28754

Mars Hill University does not discriminate on the basis of race, sex, religion, creed or handicap in the operation of any aspect of the university.

*Mars Hill University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools  
National Council for Accreditation of Teacher Education*

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## STUDENT RECOMMENDATION FORM

**APPLICANT:** Please complete your full name and phone number. Deliver this form and an addressed envelope to the person providing your recommendation. (Two recommendations required.)

Address: Mars Hill University, Adult and Graduate Studies, PO Box 6682, Mars Hill, NC 28754

Applicant's Name (print): \_\_\_\_\_

Phone Number: \_\_\_\_\_

**EVALUATOR:** Please type or print your responses to the following questions regarding the applicant mentioned above. Upon completion, please place the completed form in the envelope provided by the applicant, seal the envelope and mail it directly to Mars Hill University. This recommendation will be used only for admission to Mars Hill University, Adult and Graduate Studies and will not be shared with the applicant. Please respond in a timely manner because the recommendation is an important factor in the admission process. Thank you for your assistance.

**Additional letters may be attached.**

1. How long have you known the applicant and in what capacity?
  
  
  
  
  
  
  
  
  
  
2. What do you consider the applicant's major talents or strengths?
  
  
  
  
  
  
  
  
  
  
3. In what area(s) does the applicant need improvement or growth?

4. Comment on the applicant's interpersonal skills (establishing and maintaining relationships; rapport with supervisors, peers, subordinates; ability to work in a team environment).

5. Please rank the applicant based on the characteristics below.

	Excellent		Good		Fair		Poor		Not Applicable	
Critical thinking										
Planning & organizational skills										
Problem-solving skills										
Ability in oral and written expression										
Projects a professional image										
Adapts easily to new situations										
People skills in group situations										
Ethics and integrity										

\*Please provide any additional information if needed.

6. What is your overall recommendation for this applicant?

\_\_\_\_ Recommend without reservations

\_\_\_\_ Recommend with reservation

\_\_\_\_ Do not recommend

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Mars Hill University  
 Adult and Graduate Studies  
 PO Box 6682  
 Mars Hill, NC 28754  
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Print name: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

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## APPLICANT ESSAY QUESTION

Professional Goals Statement: In a well-written statement, clearly express how graduate studies are related to your professional goals. The statement should provide a response that also demonstrates professional knowledge of the field of education and identifies how the M.Ed. in Elementary Education will improve your classroom practice and student learning outcomes. (500-700 words)