

Graduate Admissions Check List

Part A

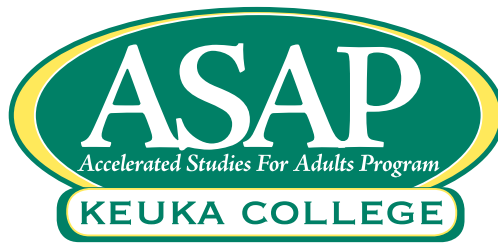
- Complete Application Form
- Submit \$50 Application Fee
- Request Official Undergraduate Transcripts
- Submit Health Forms

Part B

- Resume
- Letter of Recommendation I
- Letter of Recommendation II
- Personal Statement
- Essay (Nursing Exempt)
- Nursing Only: Copy of nursing registration/license number

Mail completed application to:

Keuka College
Center for Professional Studies
1 Keuka Business Park
Penn Yan, N.Y. 14527



APPLICATION FOR ADMISSION - MASTER OF SCIENCE

Please complete the following application. You must submit Part A and B to complete your application, but Part A is needed to reserve your spot. Sign and date the application, and return it together with your non-refundable \$50 application fee. Please make your check payable to **Keuka College**. Request official transcripts of all colleges or universities you have attended using the enclosed Transcript Request Form(s).

PART A

- MANAGEMENT
- CRIMINAL JUSTICE ADMINISTRATION
- NURSING (Concentration in Education)

Preferred Location of Study: _____

Applicant's Full Legal Name: _____ Preferred Title: ___Mr. ___Mrs. ___Miss ___Ms.

Last First Middle Former Last Name (if any)

Preferred First Name: _____

If Married, Spouse's Legal Name: _____
Last First Middle

Social Security Number: _____ Date of Birth: _____ Sex: ___M ___F Marital Status: ___Single ___Married
 ___Divorced ___Widow

Ethnicity (optional):
 American Indian or Alaskan Native White/Non-Hispanic
 Asian or Pacific Islander Hispanic
 Black/Non-Hispanic Non-resident alien

Are you an International Student? No Yes Visa Type: _____ TOEFL Score: _____

Are you a U.S. Veteran? No Yes Veteran Type: _____ Veteran Benefit you are eligible to receive: _____

Permanent Address: _____

 Residential Street Address Apt. # City State Zip Code

Mailing Address, if different from permanent address:

Street Address/P.O. Box #	Apt. #	City	State	Zip Code
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Employer:

Business/Organization Name	Complete Work Address: Street, City, State, Zip Code
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Telephone Numbers:

Home Phone	Cell Phone
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Work Phone	Other
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E-mail Address:

Home E-mail	Work E-mail
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Educational Background:

Nursing: RN License # _____

You must submit official transcripts from all colleges or universities previously attended. A form is enclosed to request transcripts. The Transcript Request Form may be duplicated, as needed.

List of previous colleges attended:

College / University Name	City / State	Dates Attended	Degree Earned
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College / University Name	City / State	Dates Attended	Degree Earned
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College / University Name	City / State	Dates Attended	Degree Earned
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College / University Name	City / State	Dates Attended	Degree Earned
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If you have previously attended Keuka College, your transcript will be obtained through the registrar's office upon receipt of your application.

PART B

Current Resume:

Please enclose a current resume with this application form.

Letters of Recommendation:

Request two letters of recommendation. Ask each person to return their completed letter of recommendation form to you in a sealed envelope. Please enclose both letters with this application form:

Recommender Name 1	Address	Telephone	Title/Position
Recommender Name 2	Address	Telephone	Title/Position

Personal Statement & Essay:

Content and writing style will be assessed.

A) Please make a brief, approximately 200-word, statement of your reasons for undertaking this particular program and your future academic and professional plans.

B) Prepare an essay, approximately 1,000 words, on the following topic: "Describe a workplace-related problem you have faced during the past five years. Describe the nature of the problem, the steps taken to address the problem and the subsequent outcome." **(Nursing Exempt)**

Specific to Master of Science in Nursing:

A) Upon consideration by the Nursing Faculty Admissions Committee, you will be required to attend Keuka College for a personal interview and an on-site writing sample.

B) Copy of nursing registration and license number is required with application packet.

Please read carefully and sign below:

Have you ever been convicted of a crime (felony or misdemeanor) in any state or country?
(if yes, enclose a written explanation)

Yes No

Have you ever been dismissed from an institution of higher learning for academic reasons?

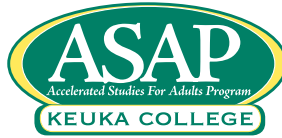
Yes No

Have you ever been dismissed from an institution of higher learning for disciplinary reasons?

Yes No

By signing this application, I agree to comply with the policies and regulations of Keuka College, and grant the College permission to use my photograph and name in College literature, on the College Web site, and for public relations purposes. My submission indicates that all information on my application is complete, factually correct and honestly presented. I understand that misrepresentation of facts on this application will be cause for refusal of admission, cancellation of admission, or suspension from the institution.

Signature _____ Date _____



OFFICIAL TRANSCRIPT REQUEST FORM

Please send this form to each college or university you have previously attended. Do not return this form to Keuka College for processing. Write clearly. Duplicate this form if you attended more than one institution.

NOTE: Your previous college or university may charge you a fee for the transcript request. To avoid delays, please contact the college/university to inquire about the appropriate fee to enclose with this transcript request form.

Name: _____

Address: _____

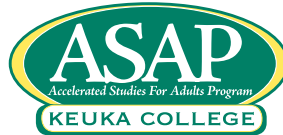
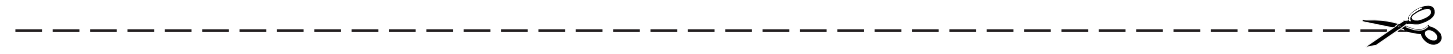
Name While Attending: _____

Social Security Number _____ Period of Time Attended: _____

By signing the bottom of this form, I authorize the release and mailing of my official transcript directly to Keuka College at the address below:

Center for Professional Studies
1 Keuka Business Park, Penn Yan, N.Y. 14527

Student's Signature: _____



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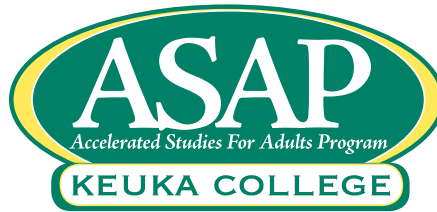
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Student's Signature: _____



Letter of Recommendation for Graduate Study

Applicant's Name: _____

The applicant requests that you complete and return this form by (date): _____

Important Guidelines for the Writer of this Recommendation:

The applicant named above has selected you as a reference. Your report will be helpful to the Graduate Admission Committee in determining whether or not the applicant should be admitted for graduate study. Criteria for evaluation include: scholarship, demeanor, oral and written communication skills, work habits, judgment, self-confidence, organizational and decision-making skills, leadership potential, commitment to their profession and the ability to successfully complete a graduate program. Please do not return this form to Keuka College. **Completed forms should be returned to the applicant in a sealed envelope by the date s/he has requested.**

1. Graduate coursework at Keuka College requires significant work experience of applicants. Please provide an overview of applicant's job description and principle duties.

2. Describe qualities you admire most about the applicant.

(Over)

3. What skills do you think the applicant could improve upon?

Please rate the applicant's ability to:

	WEAK				STRONG
Function as a member of a team	1	2	3	4	5
Problem solve	1	2	3	4	5
Execute assigned responsibilities	1	2	3	4	5
Work under stress	1	2	3	4	5
Express him/herself verbally	1	2	3	4	5
Express him/herself in writing	1	2	3	4	5
Readily apply learned material	1	2	3	4	5
Exercise sound judgment	1	2	3	4	5
Serve as a leader	1	2	3	4	5

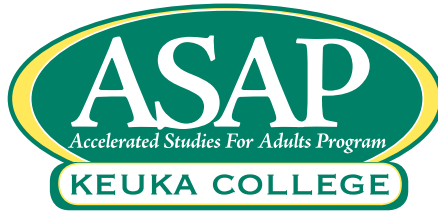
4. Include or attach any additional comments, if applicable.

Recommended by (please print): _____

Title/Position: _____

Signature: _____ Phone: _____

NOTICE: PUBLIC LAW 93-380, the Family Educational Rights and Privacy Act of 1974 as amended gives students the right of access to letters of recommendation written after January 1, 1975 and kept in a placement file in their name.



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