



# Application for Graduate or Post-baccalaureate Study

Return application with the \$30 application fee to:  
The Graduate School at the University of North Florida  
1 UNF Drive, Jacksonville, FL 32224  
(904) 620-1362 – FAX; (904) 620-1360 – PHONE  
www.unf.edu/graduatestudies

## The Graduate School

### Applicant Information

Last Name (Sur Name) \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Gender:  Male  Female Other names under which your transcripts may arrive: \_\_\_\_\_  
Nation of Citizenship: \_\_\_\_\_  
Race/Ethnicity (optional):  
 White (not of Hispanic origin)  Black (not of Hispanic origin)  Asian or Pacific Islander  Hispanic  American Indian or Alaskan Native  
If English is not your native language, how many years have you spoken or studied English? \_\_\_\_\_

### Applicant Contact Information

Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Country \_\_\_\_\_ Email Address: \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

### For Non-U.S. Citizens Only

What VISA do you presently hold?  F1  F2  J1  J2  None  Other: \_\_\_\_\_ I-94 Expiration Date: \_\_\_\_\_  
What VISA are you applying for?  F1  F2  J1  J2  None  Other: \_\_\_\_\_  
Which institution issued your last I-20? \_\_\_\_\_ Did you attend?  Yes  No  
If a **permanent immigrant**, enter the alien registration number shown on your I-551 form: \_\_\_\_\_  
You must provide a photocopy of your Alien Registration card, front and back, and attach it to this application.

### Educational Record

List EVERY college or university you have attended or will attend prior to entering this university. You must include schools even if you did not complete the term or earn a degree. Include UNF if you are a current or former student. For multi-campus institutions, indicate the specific campus. Attach additional sheets if necessary. **It is your responsibility to request official transcripts from each institution you have attended.**

School Name (Please do not Abbreviate)	City, State/Nation	Dates of Attendance	Degree, Major, and Date Earned	Credit Hours Earned or Expected

Official transcripts should be sent to: The Graduate School at UNF, 4567 St. Johns Bluff Road, S. Jacksonville, FL 32224.

### Test Scores

Indicate the date you took or plan to take the:  
Graduate Record Exam (GRE): date: \_\_\_\_\_ Scores: Verbal: \_\_\_\_\_ Quantitative: \_\_\_\_\_ Analytical Writing: \_\_\_\_\_  
Graduate Management Admissions Test (GMAT): date: \_\_\_\_\_ Scores: Verbal: \_\_\_\_\_ Quantitative: \_\_\_\_\_ Total: \_\_\_\_\_  
Test of English as a Foreign Language: date: \_\_\_\_\_ Score: \_\_\_\_\_



Program Information

Anticipated Entry Term/Year (select one):  Fall 20\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_

Please be aware that some programs do not admit every term. Additionally, the departmental deadlines vary by program. Please make sure that you are applying to an appropriate term for your major. Supplemental materials, including letters of recommendation, personal statements, writing samples and other documents, vary by program. You should consult The Graduate School website or contact the department for specific guidelines.

From the list below, please select your anticipated major and track (if applicable):

Non-Degree

Post-baccalaureate for graduate prerequisites  
Intended major \_\_\_\_\_

Graduate Certificate Programs

- Graduate Certificate in Applied Ethics\*\*
 Post-Masters Family Nurse Practitioner Cert.\*
 Health Behavior Research and Evaluation Cert.
 Counselor Educ. Advanced Cert. (post-masters)
 Certification in Educ. Leadership (post-masters)
 Certificate in Transformation of Conflict
 Certificate in Multimedia in Education
 Certificate in Web-Based Instruction
 Certificate in Technology-Enhanced Instruction
 Certificate in Post Secondary and Adult Studies
 Certificate in Advanced Teaching and Learning
 Certificate in Non-Profit Management

Doctoral Degrees

- Educational Leadership\*
 Doctor of Nursing Practice \*
 Doctor of Physical Therapy\*

Master's Degrees

College of Arts and Sciences

- M.A. in Biology\*\*
 M.S. in Biology\*\*
 M.A. in English
 M.A. in History
 \_\_\_ U.S. History
 \_\_\_ European History
 M.S. in Mathematics
 \_\_\_ Mathematics
 \_\_\_ Statistics
 M.A. in General Psychology\*
 M.A. in Counseling Psychology\*

College of Arts and Sciences (continued)

- M.A. in Practical Philosophy & Applied Ethics\*
 Master of Public Administration
 \_\_\_ General Administration
 \_\_\_ Health Administration
 \_\_\_ National Security
 \_\_\_ Local Govern. Policy & Admin.
 \_\_\_ Non-profit Management
 M.S. in Criminal Justice
 M.S. in Applied Sociology

Coggin College of Business

- Master of Business Administration
 \_\_\_ General Business
 \_\_\_ Accounting
 \_\_\_ Construction Management
 \_\_\_ Economics
 \_\_\_ E-Commerce
 \_\_\_ Finance
 \_\_\_ Human Resource Management
 \_\_\_ International Business
 \_\_\_ Logistics
 \_\_\_ Management Applications
 \_\_\_ Global MBA\*
 Master of Accountancy
 \_\_\_ Accountancy
 \_\_\_ Taxation

Brooks College of Health

- Master of Public Health
 M.S. in Rehabilitation Counseling
 Master of Health Administration
 Master of Science in Nursing\*
 \_\_\_ RN-MSN\*\*\*
 \_\_\_ Nurse Anesthesiology\*
 \_\_\_ Primary Care Nurse Practitioner\*
 \_\_\_ Clinical Nurse Specialist\*
 \_\_\_ Clinical Nurse Leader\*
 Master of Science in Health
 \_\_\_ Nutrition
 \_\_\_ Geriatric Management

College of Education and Human Services

- M.Ed. in Counselor Education
 \_\_\_ Mental Health Counseling\*\*
 \_\_\_ School Counseling (SOAR)\*
 M.Ed. in Secondary Education
 \_\_\_ Professional Education
 \_\_\_ Instructional Technology
 \_\_\_ Adult Learning
 \_\_\_ Teaching English as a Second Lang.
 M.Ed. in Elementary Education
 \_\_\_ Professional Education
 \_\_\_ Instructional Technology
 \_\_\_ Elementary (1-6) Initial Certification
 \_\_\_ Teaching English as a Second Lang.
 M.Ed. in Special Education
 \_\_\_ Disability Services
 \_\_\_ Deaf Education (K-12) (Initial Cert.)
 \_\_\_ Exceptional Student Ed. (Initial Cert.)
 M.Ed. in Educational Leadership
 \_\_\_ School Leadership
 \_\_\_ Postsecondary and Adult Studies
 \_\_\_ Advanced Teaching and Leadership
 \_\_\_ Educational Technology

College of Computing, Engineering, and Construction

- M.S. in Computer Science
 \_\_\_ Computer Science
 \_\_\_ Information Systems
 \_\_\_ Software Engineering
 M.S. in Civil Engineering
 M.S. in Electrical Engineering
 M.S. in Mechanical Engineering

\*Applications accepted for fall term only.
\*\*Applications accepted for fall or spring terms only.
\*\*\* Applications accepted for summer term only.

Failure to answer these questions and attach necessary documentation may result in the denial of your application for admission to UNF:

Have you ever left another postsecondary institution after being accused of misconduct and/or been subject to disciplinary action at another postsecondary institution?  Yes  No

Have you ever been convicted and/or have charges pending for any criminal offense other than a minor traffic violation?  Yes  No

If your answer to either of these questions is "Yes," you are required to provide a written explanation of the event. You may be required to furnish UNF with statements from your school administration or legal representation and copies of all documents explaining the final disposition of the proceedings. If your records have been expunged pursuant to applicable law, you are not required to answer "Yes" to these questions.

(Optional) If you wish to request special admission consideration based on a disability, it is the intent of the University to consider this information within the following guidelines: (1) documentation regarding the disability is to be provided on a voluntary basis, (2) all information will be kept confidential, (3) refusal to provide information will not subject the applicant to adverse treatment, and (4) information will only be used in connection with the University's voluntary efforts to overcome the effects of conditions that may have resulted in limited participation of persons with disabilities. If you wish to request special admission consideration based on a disability, check here.

Signature

I understand that this application is valid only for the term listed above. I also understand and agree that I will be bound by the University's regulations concerning application deadline dates and admission requirements as published in the University's catalog. I certify that the information given in this application is complete and accurate. I understand that to make false or fraudulent statements within this application may result in disciplinary action, denial of admission, and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the State Board of Education and the rules and regulations of the University. Should any of the information I have given change prior to my entry to the University, I will immediately notify the Graduate School.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**INFORMATION FOR RESIDENCY CLASSIFICATION**

A Florida "resident for tuition purposes" is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residence in Florida for at least twelve months. Residence in Florida must be as a bona fide domicile rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. To qualify as a Florida resident for tuition purposes you must be a U.S. Citizen, permanent resident alien, or legal alien granted indefinite stay by the Immigration and Naturalization Service. Other persons not meeting the twelve-month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and Florida Board of Education. All other persons are ineligible for classification as a Florida "resident for tuition purposes." Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents.

**NON-FLORIDA RESIDENTS**

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted, and that if I should qualify for some future term it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida residency classification.

Signature in ink \_\_\_\_\_ Date \_\_\_\_\_

**FLORIDA RESIDENTS**

*This section **must** be completed in full if you claim Florida residency for tuition purposes.*

**ATTACH COPIES (IF ANY) OF DOCUMENTATION REQUIRED**

- A copy of your and/or your parents' most recent tax return or other documentation may be requested to establish dependence/independence.  
**Dependent:** a person for whom 50% or more of his/her support is provided by another as defined by the Internal Revenue Service.  
**Independent:** a person who provides more than 50% of his/her own support.
- A copy of marriage certificate is required in **all cases** of spouse claiming partner's residency.

**Check box that applies:**

- A. I am an **independent person** and have maintained legal residence in Florida for at least **12 months**.
- B. I am a **dependent person** and my parent or legal guardian has maintained legal residence in Florida for at least **12 months**. (**Required:** Copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.)
- C. I am a **dependent person** who has resided for **five years** with an adult relative other than my parent or legal guardian, and my relative has maintained legal residence in Florida for at least 12 months. (**Required:** Copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.)
- D. I am **married to a person** who has maintained legal residence in Florida for at least 12 months. I have now established legal residence and intend to make Florida my permanent home. (**Required:** Copy of Marriage certificate, claimant's voter registration, driver license and vehicle registration.)
- E. I was **previously enrolled at a Florida state institution** and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile **less than 12 months ago** and am now re-establishing Florida legal residence.
- F. According to the United States Immigration and Naturalization Service, I am a **permanent resident alien or other legal alien** granted indefinite stay and have maintained a domicile in Florida for at least twelve months. (**Required:** INS documentation and proof of residency status.)
- G. I am a **member of the armed services** of the United States and I am stationed in Florida on active military duty pursuant to military orders, or whose home of record is Florida, or I am a member's **spouse or dependent child**. (**Required:** Copy of military orders or DD2058 showing home of record.)
- H. I am a full-time instructional or administrative employee **employed by a Florida public school, community college or institution of higher education**, or I am the **employee's spouse or dependent child**. (**Required:** Copy of employment verification.)
- I. I am part of the **Latin American/Caribbean scholarship program**. (**Required:** Copy of scholarship papers.)
- J. I am a qualified beneficiary under the terms of the **Florida Prepaid College Program**, S.240.551, F.S. (**Required:** Copy of card.)
- K. I am living on the Isthmus of Panama and have completed 12 consecutive months of college work at the F.S.U. Panama Canal Branch, or I am the student's spouse or dependent child. (**Required:** Copy of marriage certificate or proof of dependency.)
- L. I am a **Southern Regional Education Board's Academic Common Market graduate student**. (**Required:** Certification letter from State Coordinator.)
- M. I am a full-time **employee of a state agency** or political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job related law enforcement or corrections training.
- N. I am a **McKnight Fellowship** recipient. (**Required:** Verification from graduate studies.)

- **Person claiming residency should complete this section in full.**
- Documents supporting the establishment of legal residence must be dated, issued, or filed **12 months before the first day of classes** of the term for which a Florida resident classification is sought. All documentation is subject to verification.
- Additional documentation other than what is required above may be requested in some cases.

**Please print**

- 1. Name of student: \_\_\_\_\_ 2. Student Social Security number: \_\_\_\_/\_\_\_\_/\_\_\_\_\_
- 3. Name of person claiming Florida residency: \_\_\_\_\_ 4. Claimant's relationship to student: \_\_\_\_\_
- 5. Claimant's permanent legal address: \_\_\_\_\_ 6. Claimant's telephone number: (\_\_\_\_) \_\_\_\_\_

Street/PO Number \_\_\_\_\_ Apartment Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 7. **Date** claimant began establishing legal Florida residence and domicile: \_\_\_\_/\_\_\_\_/\_\_\_\_\_
- 8. Claimant's **voter registration**: State: \_\_\_\_\_ Number: \_\_\_\_\_ County: \_\_\_\_\_ Issue date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_
- 9. Claimant's **driver license**: State: \_\_\_\_\_ Number: \_\_\_\_\_ Issue date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_
- 10. Claimant's **vehicle registration**: State: \_\_\_\_\_ Tag Number: \_\_\_\_\_ Issue date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_
- 11. **Non-U.S. Citizen only**: Resident Alien Number: \_\_\_\_\_ Issue date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_ (Copy of both sides of card required.)

I do hereby swear or affirm that the above named student meets all requirements indicated in the checked category above for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and to Rule 6C-7.005 F.A.C.

Signature of person claiming Florida residency (as listed in item 3 above) \_\_\_\_\_ Date \_\_\_\_\_

## Admissions Procedures and Reminders

In addition to this application, you must submit the **application fee** (unless you are a former UNF degree-seeking student) and official copies of **all college transcripts**. Additionally, you should request an official score report from the GMAT exam (for business programs) or GRE exam (for all other graduate programs). UNF's institution code is 5490.

Many departments require letters of recommendation, personal statements, writing samples, and other supplemental materials. You should confirm with your intended program what additional documents need to be submitted with your application. **ALL** materials should be mailed to the Graduate School at the address below.

International applicants also need to submit one of the approved indicators of English language proficiency. Additionally, international transcripts will need to be evaluated by a Transcript Evaluation Service or by the UNF International Center. Please view our website for additional information for international applicants.

## Additional Campus Resources and Contact Information

Medical Compliance/Immunizations	620-2175
UNF International Center	620-2657
Office of Academic Testing	620-2927
Information Technology Services	620-2820
ITS Help Desk	620-4357
Student Affairs	620-2525
Career Services	620-2955
Cashier's Office	620-2472
Financial Aid	620-5555
Disability Resource Center	620-2769
Parking Services	620-2815
College of Arts and Sciences	620-2560
Coggin College of Business	620-2575
College of Education and Human Services	620-2530
College of Computing, Engineering and Construction	620-2985
Brooks College of Health	620-2812

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