

# APPLICATION FOR GRADUATE ADMISSION



Social Security #    -   -

Birthdate: \_\_\_\_\_  
Month Date Year

Office Use Only: ID# \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Pymt: \_\_\_\_\_  
 Initials: \_\_\_\_\_

Mr.  Mrs.  Ms.  Male  Female

Name \_\_\_\_\_  
Last, First, Middle Former

Address \_\_\_\_\_  
Number & Street

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

High School/Adult Ed. Attended \_\_\_\_\_ City/State \_\_\_\_\_ Date of Graduation \_\_\_\_\_

## INTENDED ACADEMIC PROGRAM

**DEGREE PROGRAMS** - *(Please select a specialization to assist the College in course schedule planning. You may change your specialization at anytime.)*

- Master of Business Administration (MBA)**
  - Accounting
  - Business Information Technology
  - Economics
  - Finance
  - Human Resources Management
  - Information Assurance
  - International Business
  - Marketing
  - Project Management
  - Strategic Leadership
  - Taxation
  - No Specialization

- Master of Science in Accountancy (MAC)**
- Master of Science in Finance (MSF)**
  - Corporate Finance
  - Personal Financial Planning
  - Financial Services
  - No Specialization
- Master of Science in Information Assurance (MSIA)**
  - Audit
  - Chief Information Security Officer
  - Digital Forensics
- Master of Science in Information Systems (MSIS)**
  - Information Assurance
  - Project Management
  - No Specialization

- Master of Science in International Business (MSIB)**
- Master of Science in Strategic Leadership (MSSL)**
- Master of Science in Taxation (MST)**
  - Tax Aspects of Financial and Estate Planning
  - Taxation of Corporations
  - Taxation of Small Businesses and Their Owners
  - No Specialization

*The following is a list of full degree program offerings by campus locations:*

<b>Troy Campus</b> All degree programs	<b>Novi Campus</b> MBA MSF MSIS
<b>Clinton Township</b> MBA	<b>Online</b> MBA MSIA

## INTENDED FIRST SEMESTER AT WALSH COLLEGE

Fall (September) \_\_\_\_\_ yr.  Winter (January) \_\_\_\_\_ yr.  Spring (March/April) \_\_\_\_\_ yr.  Summer (June) \_\_\_\_\_ yr.

## CAMPUS LOCATION

- Troy     Clinton Township (University Center)  
 Novi     Online

## ATTENDANCE STATUS

- Full-Time (minimum 9 credit hours)  
 Part-Time (1-8 credit hours)

## CITIZENSHIP

Country of birth \_\_\_\_\_

Are you a U.S. citizen?     Yes - ***If Yes, skip to Employment Information.***

No - If not a U.S. citizen, are you a Green Card/Permanent Resident card holder?

Yes - ***A photocopy of permanent residency must be submitted.***

No - Please complete the following: *Current Non-Immigrant Status* \_\_\_\_\_

Is English your first language?     Yes     No    *If required: TOEFL Score* \_\_\_\_\_ *MELAB Score* \_\_\_\_\_ *MTELP Score* \_\_\_\_\_

## EMPLOYMENT INFORMATION

**Current Employer** \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-mail Address \_\_\_\_\_ May we e-mail you at work?     Yes     No

Your Position/Title \_\_\_\_\_

Number of years of employment \_\_\_\_\_ Number of hours worked per week \_\_\_\_\_

Brief description of responsibilities \_\_\_\_\_

**Previous Employer** \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Your Position/Title \_\_\_\_\_

Number of years of employment \_\_\_\_\_ Number of hours worked per week \_\_\_\_\_

Brief description of responsibilities \_\_\_\_\_

**Previous Employer** \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Your Position/Title \_\_\_\_\_

Number of years of employment \_\_\_\_\_ Number of hours worked per week \_\_\_\_\_

Brief description of responsibilities \_\_\_\_\_

## EDUCATIONAL INFORMATION

List ALL colleges and universities you are currently attending or have previously attended, starting with the most recent (including Walsh College). Include all colleges you may have attended even if you did not receive credit for the course work. Please duplicate, if necessary.

**Applications cannot be processed until all required documentation is received.** You must request official transcripts from all of the colleges and universities you have previously attended and have them sent directly to your preferred Walsh College campus (addresses listed on back page). Any transcripts that are not received directly from the issuing institution will be considered unofficial. You may include copies of your transcripts, and we will use them to determine your unofficial admission status prior to receiving your official transcripts. Upon receipt of all required documentation, an admissions decision will be made and you will be notified via written communication.

### Previously Attended Colleges/Universities:

College \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degrees/# of credits earned \_\_\_\_\_

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College \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degrees/# of credits earned \_\_\_\_\_

**List any courses in which you are currently enrolled, or will enroll in prior to attending Walsh College. This list should include any course work which is currently not listed on your most recent college transcript.**

College	Course Number	Course Title	Credit Hours	Completion Date

**List any professional certifications or licensures that you have earned.**

Certification / Licensure \_\_\_\_\_

Date Awarded \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_

## COMPLIANCE STATEMENT

*I certify that the statements I have made on this application are true, correct and complete. I understand that my signature authorizes Walsh College to confirm my employment history.*

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

## THANKS FOR YOUR APPLICATION TO WALSH COLLEGE!

In order to speed processing of your application, be sure to:

- Include a \$50 check made payable to Walsh College for your application fee, or use the credit card payment authorization below. *(This fee is non-refundable.)*
- Submit official transcripts from all colleges/universities previously attended. Transcripts not received directly from the issuing institution will be considered unofficial.

I authorize Walsh College to charge \$50 to my:  VISA  MasterCard  Discover

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

## WHO or WHAT INFLUENCED YOU TO APPLY TO WALSH COLLEGE? (Please select only one answer)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Employer (WEMP)              | <input type="checkbox"/> Friend/Relative (WFR)   | <input type="checkbox"/> College Instructor (WINST)           |
| <input type="checkbox"/> Walsh College Alumni (WALUM) | <input type="checkbox"/> College Counselor (WCC) | <input type="checkbox"/> Walsh College Representatives (WWCR) |
| <input type="checkbox"/> Reputation (XREP)            | <input type="checkbox"/> Location (XLOC)         | <input type="checkbox"/> Other _____                          |
| <input type="checkbox"/> Academic Program (XAP)       | <input type="checkbox"/> Career Potential (XCAR) |   |

## OPTIONAL INFORMATION

The following information is optional and **will not** be used in determining your admission status.

- Ethnic Origin (used for statistics only):  
 Black, Non-Hispanic    American Indian/Alaska Native    Asian/Pacific Islander    White, Non-Hispanic    Hispanic    Multiracial\*  
*\*Having parents from more than one of the broad race categories listed above.*
- Do you have a disability for which you will need accommodations?       Yes       No  
If Yes, would you like someone from our Admissions and Advising office to contact you regarding requested accommodations?    Yes    No  
*If no, please contact our office once you have received your final admission decision to arrange for support services.*

## NOTICE OF NONDISCRIMINATORY POLICY

Walsh College does not discriminate on the basis of race, color, religion, sex, age, marital status, height, weight, national or ethnic origin, veteran status or disability status in admitting students or in administration of its educational policies, scholarship and loan programs or other College programs.

## CAMPUS LOCATIONS

### TROY

3838 Livernois Road  
P.O. Box 7006  
Troy, MI 48007-7006  
(248) 823-1610  
(248) 823-1611 (Fax)

### NOVI

41500 Gardenbrook Road  
Novi, MI 48375-1313  
(248) 349-5454  
(248) 349-7449 (Fax)

### CLINTON TOWNSHIP

**University Center at  
Macomb Community College**  
44575 Garfield Road  
Clinton Twp., MI 48038-1139  
(586) 723-1500  
(586) 723-1501 (Fax)

### ONLINE

**WEBSITE ADDRESS**  
www.walshcollege.edu

**ADMISSIONS E-MAIL ADDRESS**  
admissions@walshcollege.edu

## The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act

*The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act is a federal law that requires all universities and colleges to publish specific information about its campus crime and security policies. The Walsh College Annual Campus Security Report includes the required information including: Campus security policies; Reporting procedures; Campus crime statistics for the most recent 3 years; Information about crime prevention; Access to campus. The Annual Campus Security Report information is available at [www.walshcollege.edu/pages/101.asp](http://www.walshcollege.edu/pages/101.asp). A printed copy may be requested from: Walsh College, Facilities and Auxiliary Services, Campus Safety, PO Box 7006, Troy, MI 48007-7006; 248-689-8282.*