



# UNIVERSITY GRADUATE SCHOOL GRADUATE ADMISSIONS OFFICE

## Graduate Admission Application

Send the application and US \$30 application fee to: Florida International University  
Graduate Admissions Office  
P.O.Box 659004  
Miami, FL 33265-9004

Checks and money orders should be made payable to Florida International University. Do not send cash. Your application will not be processed without the required fee. Request **official transcripts** from all previous institutions to be sent to the address above. Official test scores must be sent directly from the Educational Testing Service to the Graduate Admissions Office.

<p>1. _____/_____/_____ U.S. Social Security Number</p> <p>_____</p> <p>Last Name _____ Jr., III, etc.</p> <p>_____</p> <p>First Name</p> <p>_____</p> <p>Middle Name</p>	<p>2. Date of birth: ____/____/_____ Mo. Day Yr.</p> <p>Place of Birth: _____</p> <p>City State Country</p> <p>Nation of Citizenship _____</p> <p>Country _____</p>
<p>3. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female</p>	<p>4. If your transcripts, test scores, etc. might arrive under any name(s) other than those listed above, enter that name here: _____</p>
<p>5. Current Mailing Address: _____</p> <p>Street &amp; Number City State Zip Country</p> <p>Permanent Mailing Address: (Foreign mailing address for international students.) _____</p> <p>Street &amp; Number City State Zip Country</p> <p>Phone Number: (____) _____</p> <p>Work Number: (____) _____</p> <p>Fax Number: (____) _____</p> <p>Email Address: _____</p> <p>Work Zip Code _____</p>	<p>6. Each SUS institution is a recipient of federal dollars and is required by the federal government to solicit certain demographic information to meet federal reporting requirements. Applicants are requested to provide this information voluntarily. This information will not be utilized in a discriminatory manner.</p> <p><input type="checkbox"/> White (not of Hispanic origin)</p> <p><input type="checkbox"/> Black (not of Hispanic origin)</p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Asian or Pacific Islander</p> <p><input type="checkbox"/> Hispanic</p>
<p>7. Non-U.S. citizens only: Are you a permanent resident alien?</p> <p><input type="checkbox"/> Yes. Attach a copy of both sides of your permanent resident alien card.</p> <p><input type="checkbox"/> No. What VISA do you presently hold? _____ I-94 Expiration Date : ____/____ (Mo. / Yr.)</p> <p>Which institution issued your last I-20? _____ Did you attend? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If a Permanent immigrant, enter the alien registration number shown on your I-551 form : _____</p> <p>(You must provide a photocopy of your Alien Registration card, front and back)</p> <p>If you currently do not hold a United States VISA, what VISA are you planning to apply for? _____</p>	
<p>8. Program/Major: _____</p> <p>Specialization within major : _____</p> <p>Degree Goal: (specify one)</p> <p><input type="checkbox"/> Master's <input type="checkbox"/> Specialist</p> <p><input type="checkbox"/> Doctorate</p> <p>Are you applying to a joint degree program?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, program? _____</p>	<p>9. For which term, in which year, do you seek admission?</p> <p>August _____ January _____ June _____</p> <p>10. Have you ever attended FIU?</p> <p><input type="checkbox"/> Yes (Term: _____ Year: _____) <input type="checkbox"/> No</p> <p>11. Are you currently enrolled at FIU?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

**12. An official transcript from each postsecondary school, college, or university you have attended must be provided.**

Please list in chronological order every postsecondary institution you have attended or will attend prior to entering this university. Include this university if you attended previously. For multi-campus institutions, indicate the specific campus.

**Failure to list all institutions could result in your application being denied or your admission being rescinded. Use a separate sheet if necessary.**

Enter dates of attendance (including present enrollment) and degrees earned or expected before attending this university. Include Associate Degrees, certificates, or diplomas.

Enter credit earned or expected from each institution attended.

School (Please do not abbreviate.)	City, State or Nation	Dates of Attendance				Degree/Date			Credit Hours	
		From		To		Type	Earned/Expected		Number	(S) Semester (Q) Quarter
		Mo.	Yr.	Mo.	Yr.		Mo.	Yr.		

**13. Highest degree earned prior to the anticipated term of enrollment:**

- Bachelor's     Master's     Specialist  
 Doctorate     Other: \_\_\_\_\_

**Earned GPA :** Bachelor's: \_\_\_\_\_ Graduate: \_\_\_\_\_

**14. Residency Status:**

- Florida Resident  
 Non-Florida Resident

*(All applicants must complete the residency affidavit.)*

**15. If you have taken or plan to take any of the tests below, enter the month and year. Official records of all test scores must be provided.**

Test	Highest Total score earned	1 <sup>st</sup> Time		2 <sup>nd</sup> Time		3 <sup>rd</sup> Time		4 <sup>th</sup> Time	
		Mo.	Yr.	Mo.	Yr.	Mo.	Yr.	Mo.	Yr.
GRE									
GMAT									
TOEFL									
PAEG									
Other									

*If English is not your native language and if you have not earned a degree from an institution in an English-speaking country, the Test of English as a Foreign Language (TOEFL) is required. (Residents of Puerto Rico must submit TOEFL scores.)*

**16. Failure to answer these three questions will delay processing of your application. If your answer to any of these questions is yes, you are required to provide a written explanation of the event. In addition, you may be required to furnish FIU with copies of all official documentation explaining the final disposition of the proceedings.**

Have you ever been subject to disciplinary action or do you currently have a disciplinary charge (s) pending by any educational institution for any of the following two reasons?

Academic misconduct (such as cheating)? (You do not need to disclose any academic dismissal, suspension, or probation that was due to poor grades.)  Yes  No

Behavioral misconduct?  Yes  No

Have you ever been convicted of, or charged with, a criminal offense or are you currently the subject of any criminal proceedings?  Yes  No

*You do not need to disclose information about minor traffic violations. However, you must disclose information if the traffic offense involved illegal drugs or alcohol or if any person was killed or hospitalized as a result of an accident in which you were charged for a traffic violation. You do not need to disclose information regarding any criminal offense record which has been expunged according to applicable law. You must disclose information if charges were dropped or not prosecuted because you were granted any type of pretrial diversion.*

*Failure to disclose this information may result in a revocation of admission.*

**17. Occupational or Professional Experience After Graduation From College:**

Indicate how you spent or how you plan to spend all the time from graduation until enrollment at Florida International University. Use additional paper, if needed.

Position	Location – include city and state	From		To	
		Mo.	Yr.	Mo.	Yr.

**18. Are you a Veteran?**

- Yes  No

**19. If you wish to request special admission consideration based on a disability, check here.**

I understand that this application is for admission to Florida International University and is valid only at the beginning of the term indicated in item 9 on page 1. I also understand and agree that I will be bound by the university's regulations concerning application deadline dates and admission requirements. I further agree to the release of any transcript, student record, and test score(s) to Florida International University. I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residence statement 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 Florida Board of Education and the rules and regulations of the university and its Board of Trustees. Should any of the information I have given change prior to my entry to the university, I shall immediately notify the Graduate Admissions Office. I understand that the US \$30 check or money-order I submit with this application is a non-refundable fee.

\_\_\_\_\_  
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 bonafide 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 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 documents required.**

- ♦ A notarized 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 provided more than 50% of his/her own support.

- ♦ A copy of marriage certificate is required in all cases of spouse claiming partner's residency.

- 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.
- 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
- 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 12 months. (**Required:** INS documentation and proof of Florida 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.).
- 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 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.
- M. I am a **Southern Regional Education Board's Academic Common Market** graduate student. (**Required:** Certification letter from State Coordinator.)
- N. I am a **McKnight Fellowship** recipient. (**Required:** Verification from University Graduate School.)

**Person claiming residency must 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.

**Please Print:**

1. Name of Student: \_\_\_\_\_ 2. Student's 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/P.O. Box   | Apt. No.                     | City              | State         | Zip Code                   |
| 7. Date claimant began establishing legal Florida residence and domicile: _____/_____/_____ |                              |                   |               |                            |
| 8. Claimant's <b>voter registration:</b>  | State: _____                 | Number: _____     | County: _____ | Issue Date: ____/____/____ |
| 9. Claimant's <b>driver license:</b>  | State: _____                 | Number: _____     |               | Issue Date: ____/____/____ |
| 10. Claimant's <b>vehicle registration:</b>   | State: _____                 | Tag Number: _____ |               | Issue Date: ____/____/____ |
| 11. <b>Non-U.S. Citizen only:</b>   | Resident Alien Number: _____ |                   |               | Issue Date: ____/____/____ |

*(Copy of both sides of card required.)*

**Note:** Additional documentation other than what is required above may be requested in some cases.

**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 BOR Rule 6C-7.005 F.A.C.

Signature of person claiming Florida residency (as listed in item #3 above)

Date

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