

The College of Saint Rose

Office of Graduate Admissions and Continuing Education 432 Western Avenue Albany, NY 12203 (518) 454-5143 grad@strose.edu

APPLICATION FOR GRADUATE STUDY The College of Saint Rose Distance Delivery Programs

I wish to apply for graduate study in **EDUCATIONAL LEADERSHIP** to be held at CITE or JenMarc locations.

Name: _____

Last First M.I. Prior Name(s)

Address: _____

Street Apt. County

City State Zip Code

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Date of Birth: _____ Social Security Number: _____ Gender: _____

Country of Citizenship: _____ Country of Birth: _____

Optional: Ethnic Origin: Asian Indian/Native Alaskan _____ Black/Non-Hispanic _____ White/Non-Hispanic _____
Hispanic _____ Asian/Pacific Islander _____ Other: _____

Are you a servicemember, veteran, child or spouse of a veteran? _____

Colleges and Universities attended, including previous Saint Rose credits. Begin with your most recent enrollment.

Name of Institution Dates Attended Major Degree & Date Received

| <u>Name of Institution</u> | <u>Dates Attended</u> | <u>Major</u> | <u>Degree & Date Received</u> |
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Teaching Certification(s) held: Provisional/Initial _____ Permanent/Professional _____ State of Certification _____

Certification Areas: _____

Place of Employment: _____

Job Title: _____ Date of Employment : _____

Address of Employer: _____

The College of Saint Rose does not discriminate on the basis of race/color, creed, gender, handicap, sexual orientation, national/ethnic origin, age, marital state or veteran status in the administration of its educational and admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Any grievances pertaining to discrimination should be directed to the Provost's Office.

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

Signature: _____ **Date:** _____