



Application for Admission Graduate Programs

School of Business Administration and Professional Programs

Texas Wesleyan University welcomes your interest in graduate study. Decisions concerning admission are made after a review of your academic credentials, test scores and letters of recommendation, in addition to a personal interview. Applications cannot be considered until all required materials have been submitted. All application materials become the property of the university and cannot be returned.

This application is for U.S. citizens and resident aliens. If you are a non-resident or international student applicant, please request an international student application packet.

APPLICATION PROCEDURE

The following materials should be submitted to the Office of Admission, Texas Wesleyan University, 1201 Wesleyan St., Fort Worth, Texas 76105-1536.

- The completed application for admission to graduate programs in the school of business
- Official transcripts from each college or university attended, including all undergraduate and graduate work
- Three letters of recommendation in sealed envelopes, signed across the seal by the recommendation provider
- Resume/Vita

Please list in the space below the names of three references from which Texas Wesleyan will be receiving letters of recommendation.

Name	Address	Phone

- Application fee of \$50 (non-refundable) by check or money order made payable to Texas Wesleyan University (Please do not send cash through the mail)
- Official Graduate Management Admission Test (GMAT) score for MBA
- Official Graduate Record Examination (GRE) score or (GMAT) score for Master of Science in Healthcare Administration (MSHA)

All of the above items should be sent to the Office of Admission at Texas Wesleyan University directly from all testing agencies, colleges or universities and references. When requesting official test scores, please include Texas Wesleyan's code number (6828).

ADMISSION

Please type or print in ink.

This is an application for: Year ____ Fall Spring Summer

I plan to enroll: full time (9 hours or more) Part time (less than 9 hours)

in the Master of Business Administration Program

in the Master of Science in Healthcare Administration (MSHA) program

I have: attended Texas Wesleyan University

previously submitted an application for admission to graduate programs in the school of business. Date and program of previous application _____

Please check one (applies only to the MSHA program):

Geriatric/Long-Term Care Focus

Public Health Focus

Health Administration Focus

How did you first hear of Texas Wesleyan University's graduate business programs? Direct Mail School Counselor Web Site

Advertisement Newspaper Friend Family Alumnus

Other _____

PERSONAL INFORMATION

Social Security Number _____/_____/_____

Legal Name _____
Last First Middle

Other Names on Record _____ Male Female

Street Address _____ City _____ State _____ Zip _____

Date of Birth _____/_____/_____ County of Residence _____

Phone (_____) _____ E-Mail _____

Are you a U.S. citizen? Yes No If no, resident alien? Yes No Resident Alien Number _____

If you are a non-resident alien, please request an international student application packet. If you are a resident alien, please include a photocopy of your resident alien card (I-551).

This information is voluntary and will be used in a nondiscriminatory manner for federal and/or state law reporting purposes only, consistent with applicable civil rights laws. Non-disclosure does not affect eligibility for admission.

Religious Preference _____

Check Status Non-veteran Veteran Claiming Education Benefits Veteran Not Claiming Education Benefits

Predominant Ethnic Origin White, Non-Hispanic Hispanic American Indian/Alaskan Native: Tribe _____
 African-American, Non-Hispanic Asian or Pacific Islander Other _____

HIGHER EDUCATION / ACADEMIC INFORMATION

Official transcripts must be submitted from each college attended. Below, please list all colleges/universities attended and complete the information requested. If you need additional space, please attach a separate sheet of paper.

College/University	Dates Attended	Title of Degree Obtained	Hours Completed at Each Institution
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT

Current Employer _____

Position _____ Full-time Part-time

Street Address _____ City _____ State _____ Zip _____

Are you eligible for employee education benefits? Yes No

If yes, describe _____

Work Phone (_____) _____ Work E-mail _____

May we contact you at work? Yes No List preferred contact method _____

RESUME/VITA

The resume/vita should include important information about yourself, your work experience (including responsibilities), education, interests, professional activities, community involvement, honors and awards.

FINANCIAL AID

Will you be applying for financial aid? Yes No Stafford Loan? Yes No

Will you participate in Texas Wesleyan's quarterly payment program? Yes No

Are you currently in repayment of any federal loan programs? Yes No

If yes, which loans? _____

ACADEMIC HONOR/COMMUNITY ACTIVITIES/PARTICIPATION

List academic honors, associations, etc. _____

Outline activities, offices held, and participation in school, community and/or church _____

IMMEDIATE FAMILY

Full Name _____ Relationship _____

Street Address _____ City _____ State _____ Zip _____

Occupation _____ Employer _____

Work Phone (_____) _____ Alternate Phone (_____) _____

List any relatives who have attended Texas Wesleyan (Please include graduation dates.) _____

In case of an emergency, contact _____ Relationship _____

Work Phone (_____) _____ Alternate Phone (_____) _____

MEDIA INFORMATION

Name of hometown newspaper _____

May we use your personal information or photograph for publicity/media purposes? Yes No

CAREER OBJECTIVES/PERSONAL ESSAYS

Response to the following two questions is required. Please answer the following questions in essay form on separate sheets of paper and attach to the application form.

1. What are your personal and career objectives for the next five years?
2. How do you feel a graduate business degree/health care administration degree will help you achieve your objectives in question 1?

MY SIGNATURE INDICATES THAT THIS APPLICATION FOR ADMISSION IS CORRECT AND HONESTLY REPRESENTED. I further understand that I authorize university officials to verify all information I have provided. I understand that the submission of false information or exclusion of information is grounds for rejection of my application, withdrawal of any offer and cancellation of enrollment.

Signature _____ Date _____

PLEASE FORWARD YOUR COMPLETED APPLICATION AND ALL REQUIRED MATERIALS TO:

**Office of Admission
Texas Wesleyan University
1201 Wesleyan St., Fort Worth, TX 76105-1536**

Phone: 817-531-4422 Fax: 817-531-7515

Visit our Web site: www.txwes.edu

E-mail address: admission@txwes.edu

Texas Wesleyan University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4097; Telephone Number 404-679-4501) to award baccalaureate and master's level degrees and the doctor of jurisprudence degree. The School of Law is accredited by the American Bar Association. Texas Wesleyan University does not discriminate on the basis of age, gender, race, national origin, religion, disability, citizenship or veteran's status in any of its operations or activities.



Small, Private, Personal, Urban and Accessible ... It's all within reach!