



# Division of Graduate Education

P.O. Box 172580 • Bozeman, Montana • 59717-2580  
(406)994-4145 • [www.montana.edu/gradstudies](http://www.montana.edu/gradstudies) • [gradstudy@montana.edu](mailto:gradstudy@montana.edu)

## APPLICATION FOR GRADUATE ADMISSION Retroactive Master of Architecture

### PERSONAL DATA:

Full Legal Name: \_\_\_\_\_  
Last or Family Surname      First      Full Middle or Maiden      \*U.S. Social Security Number

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Gender:  Female     Male  
Month      Day      Year

Citizenship:  U.S. Citizen       Non-U.S. Citizen  
 Non-U.S. Citizen on Permanent Status      Country of Citizenship: \_\_\_\_\_  
Permanent Resident #: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

\*We ask that you voluntarily provide your Social Security number, which permits the school to distinguish between individuals with the same or similar name. You will not be penalized should you decline to provide this number.

### CONTACT INFORMATION:

Permanent Address: \_\_\_\_\_  
Street Address      Apt #  
\_\_\_\_\_  
City      State (or Country)      Zip/Postal Code  
\_\_\_\_\_  
Telephone Number      E-mail Address

Current Mailing Address: \_\_\_\_\_  
\*\*If different from permanent      Street Address      Apt #  
\_\_\_\_\_  
City      State (or Country)      Zip/Postal Code  
\_\_\_\_\_  
Telephone Number      E-mail Address  
Valid From: \_\_\_\_\_ To: \_\_\_\_\_

\*\* All correspondence will be sent to your current mailing address. To ensure that all correspondence reaches you, please keep your mailing address up to date.

### ENROLLMENT OBJECTIVES:

Desired year and semester of enrollment: 2008 (yr)     Fall     Spring     Summer

Degree:  Master     Doctoral     Education Specialist  
Proposed Degree Program: Architecture

Non-Degree:  Non-Degree Graduate     Teacher Certification     Northern Plains Transition to Teaching     Post-Baccalaureate Pre-Medical Certificate     WWAMI Certificate

**EDUCATIONAL BACKGROUND:**

List in chronological order every college or university (including MSU) you have attended or will attend prior to entering MSU. Failure to list all institutions could result in your application being denied. Use a separate sheet if necessary. Please do not abbreviate.

Enter dates of attendance (including present enrollment and degrees earned or expected.)  
**Dates of Attendance**

School	City/State or Nation	From Mo./Yr.	To Mo./Yr.	Earned/Expected	
				Degree	Mo./Yr.
		/	/		/
		/	/		/
		/	/		/
		/	/		/

**MONTANA RESIDENCY (FOR DOMESTIC APPLICANTS ONLY)**

Are you claiming Montana residency for in-state tuition classification?

Yes\*  No

If no, specify state of resident: \_\_\_\_\_

\* If you are claiming Montana residency, you must answer each question below completely and accurately. Failure to do so WILL result in classification as an OUT-OF-STATE student for tuition purposes.

Does a parent claim you as a federal or state income tax exemption?

Yes\*  No

\*If yes, the following questions must be completed based on your Parent(s) Information

Date your permanent residency began in Montana (physical presence in Montana): \_\_\_\_\_

Dates of extended absences (more than 30 days) from Montana during the past 12 months: \_\_\_\_\_

List the last three (3) years Montana income taxes have been filed: \_\_\_\_\_

Date and Place of last two years of employment in Montana: \_\_\_\_\_

Date current Montana Driver's License was issued: \_\_\_\_\_ (mo.)/ \_\_\_\_\_ (Yr.) Is it a renewal?  Yes  No

List the last three (3) years of Montana Motor Vehicle registration: \_\_\_\_\_

Date of Montana Voter registration: \_\_\_\_\_ (mo.)/ \_\_\_\_\_ (Yr.)

**•••IMPORTANT•••**

**YOU MUST READ AND SIGN THE FOLLOWING SECTION IN ORDER TO COMPLETE YOUR APPLICATION**

Have you ever been subject to discipline, suspension or probation at any institution of post-secondary education for reasons not related to academic performance?  Yes\*  No \*If yes, please attach explanation

Have you ever been convicted of a criminal offense involving physical injury to persons or property or otherwise institutionalized for conduct causing physical injury to persons or property?  Yes\*  No \*If yes, please attach explanation

I certify that the information given in this application is complete and accurate to the best of my knowledge and understand that falsification or omission of information will be sufficient grounds for refusal of admission or for dismissal. If admitted, I hereby agree to abide by the policies of the Board of Regents and the rules and regulations of Montana State University. Should any of the information I have given change prior to my entry to the university, I shall immediately notify the Division of Graduate Education.

Applicant's Signature (sign complete legal name)

Date of Application

\*\*Ethnicity  Hispanic or Latino  Not Hispanic or Latino

\*\*Race  Asian  White  American Indian or Alaskan Native  
 Tribal Affiliation: \_\_\_\_\_

Black or African American  Native Hawaiian or Pacific Islander

\*\*Federal requirements make necessary the collection of the above data for students. However, this information will not be used as a basis for admission  
 \*\*\*Pursuant to Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Executive Order 11246 as amended, the Vietnam Veterans Readjustment Act of 1966, and the Montana State Human Rights Act, Montana institutions of higher education using this application do not discriminate in admission, or the provision of student services nor in employment policies of the basis of race, sex, national origin, marital status, creed, religion, color, age or physical or mental handicap. To request accommodation when applying for graduate admission, contact the Division of Graduate Education (phone: 406-994-4145 or email gradstudy@montana.edu).